

**FORM
INSP**Rev
X/15**State of Colorado
Oil and Gas Conservation Commission**1120 Lincoln Street, Suite 801, Denver, Colorado 80203
Phone: (303) 894-2100 Fax: (303) 894-2109

Inspection Date:

06/28/2018

Submitted Date:

06/28/2018

Document Number:

677900648**FIELD INSPECTION FORM**Loc ID 324827 Inspector Name: Welsh, Brian On-Site Inspection ☐ 2A Doc Num: _____**Operator Information:**OGCC Operator Number: 83130Name of Operator: STRACHAN EXPLORATION INCAddress: 383 INVERNESS PKWY, STE 360City: ENGLEWOOD State: CO Zip: 80112**Status Summary:**

- ☐ THIS IS A FOLLOW UP INSPECTION
- ☐ FOLLOW UP INSPECTION REQUIRED
- ☐ NO FOLLOW UP INSPECTION REQUIRED

Findings:8 Number of Comments0 Number of Corrective Actions☐ Corrective Action Response Requested**Contact Information:**

Contact Name	Phone	Email	Comment
Quint, Craig		craig.quint@state.co.us	
Strachan, Steve	(303) 785-7006	sms@strachanexploration.com	

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
212992	WELL	IJ	05/01/2017	ERIW	061-06353	HELFRICH 1	AC

General Comment:

Routine UIC Inspection

Location

Lease Road:			
Type	Access		
comment:	Dirt road through farm ground		
Corrective Action		Date:	

Overall Good: ☒

Signs/Marker:			
Type	BATTERY		
Comment:	Lease sign at tank battery		
Corrective Action:		Date:	
Type	TANK LABELS/PLACARDS		
Comment:	Stickers on tanks		
Corrective Action:		Date:	
Type	WELLHEAD		
Comment:	Lease sign by wellhead		
Corrective Action:		Date:	

Emergency Contact Number:

Comment:

Corrective Action:

Date: _____

Overall Good: ☒

Spills:					
Type	Area	Volume			

In Containment: No

Comment:

☐ Multiple Spills and Releases?

Fencing/:			
Type	TANK BATTERY		
Comment:	Wire fence around tank battery		
Corrective Action:		Date:	
Type	WELLHEAD		
Comment:	Metal panels around wellhead		
Corrective Action:		Date:	

Venting:

Yes/No	NO		
Comment:			
Corrective Action:		Date:	

Flaring:

Type			
Comment:			

Corrective Action:		Date:	
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Inspected FacilitiesFacility ID: 212992 Type: WELL API Number: 061-06353 Status: IJ Insp. Status: AC**Underground Injection Control**

UIC Violation: _____ Maximum Injection Pressure: _____

UIC RoutineInj./Tube: Pressure or inches of Hg -19" Hg Previous Test Pressure _____ MPP _____

(e.g. 30 psig or -30" Hg)

Inj Zone: MRRWTC: Pressure or inches of Hg 0 PSIG Previous Test Pressure _____ Last MIT: 05/15/2014Brhd: Pressure or inches of Hg _____ Previous Test Pressure _____ AnnMTReq: NOComment: CASING HAD A LIGHT PUFF, DIED IMMEDIATELY. TBG IJ @ -19" Hg

Corrective Action: _____ Date: _____

Method of Injection: GRAVITY FEED

Test Type: _____ Tbg psi: _____ Csg psi: _____ BH psi: _____

Insp. Status: _____

Comment: _____

Corrective Action: _____ Date: _____

Reclamation - Storm Water - Pit

Storm Water:

Loc Erosion BMPs	BMP Maintenance	Lease Road Erosion BMPs	Lease BMP Maintenance	Chemical BMPs	Chemical BMP Maintenance	Comment
Other	Pass	Compaction	Pass			

Comment:

Corrective Action:

Date:

Pits: ☒ NO SURFACE INDICATION OF PIT