

**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:

07/10/2018

Submitted Date:

07/10/2018

Document Number:

677900740**FIELD INSPECTION FORM**Loc ID 321853 Inspector Name: Welsh, Brian On-Site Inspection ☐ 2A Doc Num: _____**Operator Information:**OGCC Operator Number: 61250Name of Operator: MULL DRILLING COMPANY INCAddress: 1700 N WATERFRONT PKWY B#1200City: WICHITA State: KS Zip: 67206-**Status Summary:**

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

Findings:6 Number of Comments0 Number of Corrective Actions☐ Corrective Action Response Requested**Contact Information:**

Contact Name	Phone	Email	Comment
Beilman, James		jbeilman@mulldrilling.com	
Akers, Tracy	719-342-1813	takers@mulldrilling.com	
Quint, Craig		craig.quint@state.co.us	

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
208227	WELL	SI	12/15/2006	ERIW	017-07162	NWAU 23 WIW	SI

General Comment:5 Year UIC MIT

Location

Lease Road:			
Type	Access		
comment:	Partially elevated gravel road through farm ground		
Corrective ActionL		Date:	

Overall Good: ☒

Signs/Marker:			
Type	WELLHEAD		
Comment:	Lease sign by cathodic rectifier		
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	WELLHEAD		
Comment:	Metal panels around wellhead		
Corrective Action:		Date:	
Type	OTHER		
Comment:	Metal cage around cathodic rectifier		
Corrective Action:		Date:	

Venting:			
Yes/No	NO		
Comment:			
Corrective Action:		Date:	

Flaring:			
Type			
Comment:			
Corrective Action:		Date:	

Inspected FacilitiesFacility ID: 208227 Type: WELL API Number: 017-07162 Status: SI Insp. Status: SI**Underground Injection Control**

UIC Violation: _____ Maximum Injection Pressure: _____

UIC Routine

Inj./Tube:	Pressure or inches of Hg _____ (e.g. 30 psig or -30" Hg)	Previous Test Pressure _____	MPP _____
TC:	Pressure or inches of Hg _____	Previous Test Pressure _____	Inj Zone: <u>MRRW</u>
Brhd:	Pressure or inches of Hg _____	Previous Test Pressure _____	Last MIT: <u>07/08/2013</u>
			AnnMTReq: <u>NO</u>

Comment: _____

Corrective Action: _____ Date: _____

Method of Injection: _____

Test Type: 5 Year Tbg psi: 125 Csg psi: 0 PSIG BH psi: _____Insp. Status: PassComment: INITIAL CSG HAD LIGHT BLOW, DIED IMMEDIATELY. MIRU PROSTIM. LOADED W/1BBL. PRESSURED CSG TO 400 PSIG. 5 MIN 400#. 10 MIN 400#. 15 MIN 400#. 0 PSI LOSS

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
Compaction	Pass	Gravel	Pass			

Comment: Corrective Action: Date: **Pits:** ☒ NO SURFACE INDICATION OF PIT**Attached Documents**You can go to COGCC Images (<https://cogcc.state.co.us/weblink/>) and search by document number:

Document Num	Description	URL
677900749	Form 21	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4519529