

**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:

08/13/2018

Submitted Date:

08/14/2018

Document Number:

680303732

FIELD INSPECTION FORM

Loc ID 435430 Inspector Name: SCHURE, KYM On-Site Inspection 2A Doc Num: _____

Status Summary:

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

Operator Information:

OGCC Operator Number: 10440
Name of Operator: AURORA POWER RESOURCES INC
Address: 4645 SWEETWATER BLVD STE 200
City: SUGAR LAND State: TX Zip: 77479

Findings:

- 9 Number of Comments
- 0 Number of Corrective Actions
- Corrective Action Response Requested

Contact Information:

Contact Name	Phone	Email	Comment
Jones, Edward J.		jejones@aurorapower.com	

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
435431	WELL	TA	05/01/2018	OW	087-08177	Ehrlich 1A	TA
435432	WELL	SI	01/01/2017	OW	087-08178	David Bender 1A	SI

General Comment:

[P&A Inspection - FIR](#)

Location

Lease Road:			
Type	Access		
comment:	Satisfactory - Maintain lease road until final reclamation is approved.		
Corrective ActionL		Date:	

Overall Good:

Signs/Marker:			
Type	WELLHEAD		
Comment:	Satisfactory		
Corrective Action:		Date:	

Emergency Contact Number:			
Comment:	Satisfactory		
Corrective Action:		Date:	

Overall Good:

Spills:			
Type	Area	Volume	

In Containment: No

Comment:

Multiple Spills and Releases?

Equipment:			corrective date
Type: Other	# 0		
Comment:	Remove all production equipment upon completion of P&A. Contact COGCC Environmental Group and COGCC Reclamation Group upon completion of P&A for directives.		
Corrective Action:		Date:	

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

Flaring:			
Type			
Comment:			
Corrective Action:		Date:	

Inspected Facilities

Facility ID: 435431 Type: WELL API Number: 087-08177 Status: TA Insp. Status: TA

Facility ID: 435432 Type: WELL API Number: 087-08178 Status: SI Insp. Status: SI

Cement

Cement Contractor

Contractor Name: Bohler Well Service

Contractor Phone: 970-522-3078

Surface Casing

Cement Volume (sx): _____

Circulate to Surface: _____

Cement Fall Back: _____

Top Job, 1" Volume: _____

Intermediate Casing

Cement Volume (sxs): _____

Good Return During Job: _____

Production Casing

Cement Volume (sx): _____

Good Return During Job: _____

Plugging Operations

Depth Plugs(feet range): _____

Cement Volume (sx): _____

Good Return During Job: _____

Cement Type: _____

Comment: Safety meeting w/daily work plan, checked well pressure - Tubing = 0 psi. Casing = 200 psi. (blow down casing), killed well with (30) bbls., unlanded tubing, released anchor, N.U. - B.O.P. tested- R.U. tester, TBO tested (1900') hung to derrick, remaining tested on trailer (197) jts. total. Shut well in - Shut down.

Corrective Action: _____

Date: _____

Idle Well

Purpose: Shut In Temporarily Abandoned

Reminder: _____

Comment: Well P&A proceeding.

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	In Process	Other	In Process			

Comment:

Corrective Action:

Date: _____

Pits: NO SURFACE INDICATION OF PIT

COGCC Comments

Comment	User	Date
P&A	schureky	08/14/2018