

STATE OF COLORADO  
OIL AND GAS CONSERVATION COMMISSION  
Department of Natural Resources  
Suite 380, Logan Tower Building  
1580 Logan Street  
Denver, Colorado 80203

NOTICE SENT

4-6-89

PIT# 101099, 101100, 101101  
Doc# 2303215  
Date: 03/30/1989

Phillips Petro Co  
210 Cameron St.  
P.O. Box 343  
Brush, Color 80723

Lease Rediess #1, #2  
Field Pleasant Ridge  
County Morgan  
Location SW 18-1N-56W

Gentlemen:

An inspection was made of the lease(s) shown above. The following conditions were observed to exist at the time of the inspection.

- Oil accumulation on the water in the retaining pit.
- Skim pit in need of repairs. *Not covered properly.*
- Skim pit or tank should be constructed.
- No I.D. number on tank.
- Incorrect I.D. number on tank.
- Needs wellhead sign.

Remarks: \_\_\_\_\_

The above condition(s) should be corrected immediately. Any surface accumulation of oil in the retaining pits must be cleaned off within ten (10) days after receipt of this notice (Rule 328), and a report submitted to this office within thirty (30) days after the work was accomplished, advising us of the date and manner in which the correction was made. Any person who fails to comply with this request is subject to the penalties as provided for under 34-6-121 of the Oil and Gas Conservation Act.

EBB  
Field Engineer

William R. Smith  
William R. Smith, Director

3-30-89  
Date of Inspection

LEASE INSPECTION FORM

DATE 3-30-89 OPERATOR Phillips → Skuer FIELD Pleasant Ridge  
 COUNTY Morgan LEASE Redless 1, 2 LOCATION E/2 SW 18-1 N 56  
 WELLS & STATUS #1 PV #2 SI (#2 SI long time from appearance)  
 CLASS 3-C LEASE SIGN:  YES  NO TANK ID:  YES  NO  NA

TYPE OF OBSERVED WATER DISPOSAL:

EVAP. PITS  TANKS/TRUCKED  INJECTED\*  NOT DETERMINED  NA

ESTIMATED WATER PRODUCTION \_\_\_\_\_

BRADENHEAD PRESSURE \_\_\_\_\_ FLUID: NO  YES  TYPE \_\_\_\_\_

STOCK TANKS 1-400

EQUIPMENT R4T v sep propane Sacks

SKIM TANK/PIT 50x50 3/4 oil covered No lid or cover

PITS 1) 50x50 oily  
2) 30x100 clean water 1/2 full

CONDITION OF LEASE \_\_\_\_\_

RECOMMENDED ACTION \_\_\_\_\_

PIT PERMIT  YES  NO, LINER REQUIRED  YES  NO, TDS \_\_\_\_\_ ppm

REPORTED WATER PRODUCTION \_\_\_\_\_ BBLs/DAY LEASE NUMBER \_\_\_\_\_

\*INJECTION FACILITY: NAME \_\_\_\_\_ LOCATION \_\_\_\_\_

NOTICE SENT  YES  NO DATE SENT \_\_\_\_\_ INSPECTOR EBB