

**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:

02/05/2019

Submitted Date:

02/05/2019

Document Number:

680304585

**FIELD INSPECTION FORM**

Loc ID 313839 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: 76840  
Name of Operator: SCHNEIDER ENERGY SERVICES INC  
Address: P O BOX 889  
City: FORT MORGAN State: CO Zip: 80701

**Findings:**

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

**ANY CORRECTIVE ACTION(S) FROM PREVIOUS INSPECTIONS THAT HAVE NOT BEEN ADDRESSED ARE STILL APPLICABLE**

**Contact Information:**

Contact Name	Phone	Email	Comment
Schneider, Jeff	970-867-9437/ (214) 244-3819	jeff@schneiderenergy.com	

**Inspected Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
225931	WELL	PR	08/01/2018	OW	087-06392	STROMSOE 1	PR

**General Comment:**

[Bradenhead Inspection](#)

<b>Location</b>			
<b>Lease Road:</b>			
Type	Access		
comment:	Maintain lease road until final reclamation is approved		
Corrective ActionL		Date:	
Overall Good: <input type="checkbox"/>			
<b>Signs/Marker:</b>			
Type	WELLHEAD		
Comment:	Satisfactory		
Corrective Action:		Date:	
Emergency Contact Number:			
Comment:	Satisfactory		
Corrective Action:		Date:	
Overall Good: <input checked="" type="checkbox"/>			
<b>Spills:</b>			
Type	Area	Volume	
In Containment: No			
Comment:			
<input type="checkbox"/> Multiple Spills and Releases?			
<b>Equipment:</b>			
Type: Other	# 0		corrective date
Comment:	Remove all production equipment following P&A		
Corrective Action:		Date:	
<b>Venting:</b>			
Yes/No			
Comment:			
Corrective Action:		Date:	
<b>Flaring:</b>			
Type			
Comment:			
Corrective Action:		Date:	

**Inspected Facilities**

Facility ID: 225931 Type: WELL API Number: 087-06392 Status: PR Insp. Status: PR

**BradenHead**

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
Gravel	In Process	Other	In Process			

Comment: [Continue erosion BMPs during P&A and reclamation](#)

Corrective Action:

Date: \_\_\_\_\_

**Pits:**  NO SURFACE INDICATION OF PIT