

**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:

04/02/2019

Submitted Date:

04/02/2019

Document Number:

688304230**FIELD INSPECTION FORM**Loc ID 316948 Inspector Name: Sherman, Susan On-Site Inspection ☐ 2A Doc Num: _____**Operator Information:**OGCC Operator Number: 10634Name of Operator: P O & G OPERATING LLCAddress: 5847 SAN FELIPE SUITE 3200City: HOUSTON State: TX Zip: 77057**Status Summary:**

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

Findings:4 Number of Comments0 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
Colotta, Wendy		wendy_colotta@pogresources.com	
Hudson, Glenn	713-589-8186	glenn_hudson@pogresources.com	All Inspections
Vasquez, Kelly	713-589-8192	kelly_vasquez@pogresources.com	Desiganted Agent

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
233400	WELL	SI	05/31/2006	OW	121-05438	COWLES 4	TA

General Comment:[MIT Inspection](#)

LocationOverall Good: ☒

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

Emergency Contact Number:

Comment:

Corrective Action: Date:

Overall Good: ☐

Spills:					
Type	Area	Volume			

In Containment: No

Comment: ☐ Multiple Spills and Releases?

Equipment:			corrective date
Type: Deadman # & Marked	# 4		
Comment:			
Corrective Action:		Date:	

Venting:

Yes/No			
Comment:			
Corrective Action:		Date:	

Flaring:

Type		
Comment:		
Corrective Action:		Date:

Inspected FacilitiesFacility ID: 233400 Type: WELL API Number: 121-05438 Status: SI Insp. Status: TA**Idle Well**Purpose: ☐ Shut In ☒ Temporarily Abandoned

Reminder: _____

Comment: [Form 4 TA_status is in process.](#)[MIT/casing only](#)[0 psi prior to test](#)[0 min 356 psi](#)[5 min 355 psi](#)[10 min 354 psi](#)[15 min 354 psi](#)[0 psi after test](#)[Form 21 is attached. Operator to submit Form 21 electronically.](#)

Corrective Action: _____

Date: _____

Attached DocumentsYou can go to COGCC Images (<https://cogcc.state.co.us/weblink/>) and search by document number:

Document Num	Description	URL
688304366	P O & G Operating LLC, Cowles 4	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4781796
688304367	Cowles 4 Form 21	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4781797