

**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:

04/18/2019

Submitted Date:

04/18/2019

Document Number:

692601677**FIELD INSPECTION FORM**
 Loc ID 321096 Inspector Name: Welsh, Brian On-Site Inspection ☐ 2A Doc Num:
Operator Information:OGCC Operator Number: 10330Name of Operator: INVESTMENT EQUIPMENT LLCAddress: 412 W PLATTE AVECity: FT MORGAN State: CO Zip: 80701**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**ANY CORRECTIVE ACTION(S) FROM
PREVIOUS INSPECTIONS THAT HAVE NOT
BEEN ADDRESSED ARE STILL APPLICABLE****Contact Information:**

| Contact Name | Phone | Email | Comment |
|--------------|--------------|-------------------------------|---------|
| Chisolm, Jim | 405-642-9437 | investmentequipment@gmail.com | |
| Quint, Craig | | craig.quint@state.co.us | |

Inspected Facilities:

| Facility ID | Type | Status | Status Date | Well Class | API Num | Facility Name | Insp Status |
|-------------|------|--------|-------------|------------|-----------|---------------|-------------|
| 206029 | WELL | IJ | 11/12/2015 | ERIW | 009-06445 | TSRU 601W | AC |

General Comment:Routine UIC Inspection

Location

| | | | |
|--------------------|---------------------------|-------|--|
| Lease Road: | | | |
| Type | Access | | |
| comment: | Two track through pasture | | |
| Corrective Action | L | Date: | |

Overall Good: ☒

| | | | |
|----------------------|------------------------|-------|--|
| Signs/Marker: | | | |
| Type | WELLHEAD | | |
| Comment: | Lease sign by wellhead | | |
| 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: | Pipe fence around wellhead | | |
| Corrective Action: | | Date: | |

Venting:

| | | | |
|--------------------|----|-------|--|
| Yes/No | NO | | |
| Comment: | | | |
| Corrective Action: | | Date: | |

Flaring:

| | | |
|--------------------|--|-------|
| Type | | |
| Comment: | | |
| Corrective Action: | | Date: |

Inspected FacilitiesFacility ID: 206029 Type: WELL API Number: 009-06445 Status: IJ Insp. Status: AC**Underground Injection Control**

UIC Violation: _____ Maximum Injection Pressure: _____

UIC RoutineInj./Tube: Pressure or inches of Hg -13" Hg Previous Test Pressure _____ MPP _____

(e.g. 30 psig or -30" Hg)

Inj Zone: LNSNGTC: Pressure or inches of Hg 0 PSIG Previous Test Pressure _____ Last MIT: 07/24/2018Brhd: Pressure or inches of Hg _____ Previous Test Pressure _____ AnnMTReq: NOComment: CASING HAD A LIGHT VACUUM THAT DIED IMMEDIATELY. TBG IJ @ -13" Hg

Corrective Action: _____ Date: _____

Method of Injection: PUMP FEED

Test Type: _____ Tbg psi: _____ Csg psi: _____ BH psi: _____

Insp. Status: _____

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 | Pass | Compaction | Pass | | | |

Comment: Location and access are grassed over

Corrective Action:

Date:

Pits: ☒ NO SURFACE INDICATION OF PIT