

**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:

06/10/2019

Submitted Date:

06/10/2019

Document Number:

680305107**FIELD INSPECTION FORM**
 Loc ID 312206 Inspector Name: SCHURE, KYM On-Site Inspection ☐ 2A Doc Num:
Operator Information:OGCC Operator Number: 88370Name of Operator: TIMKA RESOURCES LTDAddress: 2116 EAST HIGHWAY 402City: LOVELAND State: CO Zip: 80537**Status Summary:**

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

Findings:8 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
Pivonka, Todd		tpivonka@outlook.com	
Quint, Craig		craig.quint@state.co.us	

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
219503	WELL	IJ	03/06/2018	DSPW	075-06434	WHITTIER A 1	AC

General Comment:

UIC Routine FIR - SATISFACTORY

Location**Lease Road:**

Type	Access		
comment:	Satisfactory		
Corrective Action:		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		
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In Containment: No

Comment:

☐ Multiple Spills and Releases?**Equipment:**

Type: Other	# 0		corrective date
Comment:	No change in equipment inventoried.		
Corrective Action:		Date:	

Venting:

Yes/No			
Comment:			
Corrective Action:		Date:	

Flaring:

Type			
Comment:			
Corrective Action:		Date:	

Inspected FacilitiesFacility ID: 219503 Type: WELL API Number: 075-06434 Status: IJ Insp. Status: AC**Underground Injection Control**

UIC Violation: _____ Maximum Injection Pressure: _____

UIC Routine

Inj./Tube: Pressure or inches of Hg -18" Previous Test Pressure _____ MPP _____
 (e.g. 30 psig or -30" Hg) Inj Zone: JSND

TC: Pressure or inches of Hg 0 Previous Test Pressure _____ Last MIT: 07/28/2017

Brhd: Pressure or inches of Hg _____ Previous Test Pressure _____ AnnMTReq: _____

Comment: Tubing on vacuum. Casing psi = 0.

Corrective Action: _____ Date: _____

Method of Injection: _____

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

Insp. Status: _____

Comment: _____

Corrective Action: _____ Date: _____

BradenHeadComment: Casing psi. = 0 Slight puff on opening valve, no pressure. Tubing on vacuum

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:

Use BMP's for erosion management.

Corrective Action:

Date:

Pits: ☐ NO SURFACE INDICATION OF PIT