

**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:

07/09/2019

Submitted Date:

07/15/2019

Document Number:

680305231

FIELD INSPECTION FORM

Loc ID 454199 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: 10657
Name of Operator: PCR OPERATING LLC
Address: 4040 BROADWAY STREET #510
City: SAN ANTONIO State: TX Zip: 78209

Findings:

4 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
Quint, Craig		craig.quint@state.co.us	
Wehrer, Gene	(970) 380-4860	gwehrer@passcreekresource.com	Adena Inspections

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
454198	WELL	PR		ERIW	087-08225	JESS 158-13-34	PR

General Comment:

[UIC/Routine Inspection FIR 2019](#)
Note to Operator: Well was completed and put into service in Oct. 2018 as an IJ well. Scoutcard shows well status as PR, update/correct well status.

Inspected Facilities

Facility ID: 454198 Type: WELL API Number: 087-08225 Status: PR Insp. Status: PR

Underground Injection Control

UIC Violation: _____ Maximum Injection Pressure: _____

UIC Routine

Inj./Tube: Pressure or inches of Hg -1 Previous Test Pressure _____ MPP _____
 (e.g. 30 psig or -30" Hg) Inj Zone: JSND

TC: Pressure or inches of Hg o Previous Test Pressure _____ Last MIT: 07/16/2018

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

Comment: Tubing on vacuum. Casing = 0 psi.
Well status on scout card shows PR, well was completed and put into service in Oct. 2018 as IJ.

Corrective Action: _____ Date: _____

Method of Injection: _____

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

Insp. Status: _____

Comment: _____

Corrective Action: _____ Date: _____

COGCC Comments

Comment	User	Date
UIC/Routine 2019	schureky	07/15/2019