

**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:

07/11/2019

Submitted Date:

07/11/2019

Document Number:

692602141

FIELD INSPECTION FORM

Loc ID 321623 Inspector Name: Welsh, Brian 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: 61250
Name of Operator: MULL DRILLING COMPANY INC
Address: 1700 N WATERFRONT PKWY B#1200
City: WICHITA State: KS Zip: 67206-

Findings:

8 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
Akers, Tracy	719-342-1813	takers@mulldrilling.com	
Quint, Craig		craig.quint@state.co.us	

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
207547	WELL	IJ	10/21/1983	DSPW	017-06482	PELTON-TWIN 1-SWD	AC

General Comment:

[Routine UIC Inspection](#)

Location

Lease Road:			
Type	Access		
comment:	Gravel road through farm ground		
Corrective Action:			Date:

Overall Good:

Signs/Marker:			
Type	BATTERY		
Comment:	Lease sign by tank battery		
Corrective Action:			Date:
Type	WELLHEAD		
Comment:	Lease sign by wellhead		
Corrective Action:			Date:
Type	TANK LABELS/PLACARDS		
Comment:	Metal signs by tanks		
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:

Equipment:			corrective date
Type: Ancillary equipment	# 3		
Comment:	Cathodic rectifier at REA pole, electric panel, Telemetry equipment		
Corrective Action:			Date:

Tanks and Berms:						
Contents	#	Capacity	Type	Tank ID	SE GPS	
PRODUCED WATER	2	400 BBLs	FIBERGLASS AST		38.879230,-102.332980	
Comment:						
Corrective Action:						Date:

Paint

Condition	
Other (Content)	
Other (Capacity)	
Other (Type)	

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Earth	Adequate	Walls Sufficient	Base Sufficient	Adequate
Comment:				
Corrective Action:				Date:

Venting:

Yes/No	NO		
Comment:			
Corrective Action:			Date:

Flaring:

Type	
Comment:	
Corrective Action:	Date:

Inspected Facilities

Facility ID: 207547 Type: WELL API Number: 017-06482 Status: IJ Insp. Status: AC

Underground Injection Control

UIC Violation: _____ Maximum Injection Pressure: _____

UIC Routine

Inj./Tube:	Pressure or inches of Hg <u>-17.5" Hg</u> (e.g. 30 psig or -30" Hg)	Previous Test Pressure _____	MPP _____
TC:	Pressure or inches of Hg <u>0 PSIG</u>	Previous Test Pressure _____	Inj Zone: <u>ABCK</u>
Brhd:	Pressure or inches of Hg _____	Previous Test Pressure _____	Last MIT: <u>05/14/2018</u>
			AnnMTReq: <u>NO</u>

Comment: CASING HAD LIGHT VACUUM, DIED IMMEDIATELY. TBG IJ @ -17.5" HG

Corrective Action: _____ Date: _____

Method of Injection: GRAVITY 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	Gravel	Pass			

Comment:

Corrective Action:

Date: _____

Pits: NO SURFACE INDICATION OF PIT