

**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:

07/22/2019

Submitted Date:

07/23/2019

Document Number:

680305317

FIELD INSPECTION FORM

Loc ID 312139 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: 35190
Name of Operator: GRAYHORSE OPERATING INC
Address: 20 EAST 5TH ST STE 320
City: TULSA State: OK Zip: 74103

Findings:

10 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
Burn, Diana		diana.burn@state.co.us	
Koehler, Bob		bob.koehler@state.co.us	
Crumley, Judy		jlccrumley@gmail.com	
,		kyancey@grayhorse.net	
Sutphin, Dirk		dirk.sutphin@state.co.us	

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
218811	WELL	IJ	05/01/2000	DSPW	075-05562	HOXIE 2 WD	SI

General Comment:

WO Set liner on IJ well to repair pressure loss and attain mechanical integrity. WO in progress.
Form 42 received (no doc no.) requesting MIT, FI Schure waived (10) day scheduling notification for test.

Location

Lease Road:			
Type	Access		
comment:	Two track dryland cropland		
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		

In Containment: No

Comment:

Multiple Spills and Releases?

Fencing/:			
Type	WELLHEAD		
Comment:	Heavy welded wire surround		
Corrective Action:		Date:	

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

Venting:			
Yes/No			
Comment:			
Corrective Action:		Date:	

Flaring:			
Type			
Comment:			
Corrective Action:		Date:	

Inspected Facilities

Facility ID: 218811 Type: WELL API Number: 075-05562 Status: IJ Insp. Status: SI

Underground Injection Control

UIC Violation: _____ Maximum Injection Pressure: _____

UIC Routine

Inj./Tube:	Pressure or inches of Hg _____ (e.g. 30 psig or -30" Hg)	Previous Test Pressure _____	MPP _____
TC:	Pressure or inches of Hg _____	Previous Test Pressure _____	Inj Zone: <u>JSND</u>
Brhd:	Pressure or inches of Hg _____	Previous Test Pressure _____	Last MIT: <u>06/11/2014</u>
			AnnMTReq: _____

Comment: _____

Corrective Action: _____ Date: _____

Method of Injection: _____

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

Insp. Status: _____

Comment: [WO to repair IJ well for pressure loss Doc#680305106, setting liner to attain mechanical integrity.](#)

Corrective Action: _____ Date: _____

Workover

Comment: [WO to set liner repairing pressure loss on IJ well. Cut off \(4.5"\) liner, weld on spacer ring & \(4.5"\) bell nipple, RU \(4.5"\) Larki in well head & WH Larkin flange & WH, run in with \(3-7/8"\) bit, bit sub rest of string, drilled through cement & plug, pushed plug BOH, pulled tubing, took off WH & WH flange, capped well off, shut well in, shut down for night.](#)

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: [Located within dryland cropland with rotational tillage](#)

Corrective Action:

Date: _____

Pits: NO SURFACE INDICATION OF PIT

COGCC Comments

Comment	User	Date
WO on IJ well, setting liner preparing for MIT.	schureky	07/23/2019