

FORM
INSPRev
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:

09/07/2019

Submitted Date:

09/17/2019

Document Number:

680305633

FIELD INSPECTION FORM

Loc ID _____ Inspector Name: _____ On-Site Inspection
313844 _____ SCHURE, KYM _____ 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: 20275

Name of Operator: CORAL PRODUCTION CORP

Address: 1600 STOUT ST STE 1500

City: DENVER State: CO Zip: 80202

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
Chonka, Jim	(303) 623-3573	jpchonka@netscape.net	

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
226311	WELL	SI	10/01/2018	OW	087-07047	PETERSEN 1	PA

General Comment:

P&A COMPLETED - NO PROBLEMS FOUND

Location

Lease Road:			
Type	Access		
comment:	Maintain lease road until final reclamation is approved.		
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?

Equipment:			corrective date
Type: Other	# 0		
Comment:	P&A Completed - awaiting cut off and cap to follow. Remove all equipment from location and begin reclamation process.		
Corrective Action:		Date:	

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

Flaring:			
Type			
Comment:			
Corrective Action:		Date:	

Inspected Facilities

Facility ID: 226311 Type: WELL API Number: 087-07047 Status: SI Insp. Status: PA

Cement

Cement Contractor

Contractor Name: Yetter Well Service

Contractor Phone: 970-522-2885

Surface Casing

Cement Volume (sx): _____

Circulate to Surface: _____

Cement Fall Back: _____

Top Job, 1" Volume: _____

Intermediate Casing

Cement Volume (sxs): _____

Good Return During Job: _____

Production Casing

Cement Volume (sx): _____

Good Return During Job: _____

Plugging Operations

Depth Plugs(feet range): _____

Cement Volume (sx): _____

Good Return During Job: _____

Cement Type: _____

Comment: P&A Completed. Topped off to surface, RDMO. SATISFACTORY P&A Awaiting cut/cap/backfill to follow.

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
Other	In Process	Other	In Process			

Comment:

Corrective Action:

Date: _____

Pits: NO SURFACE INDICATION OF PIT

COGCC Comments

Comment	User	Date
P&A COMPLETED - SATISFACTORY	schureky	09/17/2019