

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:

09/11/2019

Submitted Date:

09/18/2019

Document Number:

680305639

**FIELD INSPECTION FORM**

Loc ID \_\_\_\_\_ Inspector Name: \_\_\_\_\_ On-Site Inspection   
313846 \_\_\_\_\_ SCHURE, KYM \_\_\_\_\_ 2A Doc Num: \_\_\_\_\_

**Operator Information:**

OGCC Operator Number: 20275

Name of Operator: CORAL PRODUCTION CORP

Address: 1600 STOUT ST STE 1500

City: DENVER State: CO Zip: 80202

**Status Summary:**

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

**Findings:**

9 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
226333	WELL	SI	10/01/2018	OW	087-07069	PETERSON 2	PA

**General Comment:**

P&A in process Day (3) COMPLETED No problems - Awaiting cut/cap/backfill to follow.

**Location**

**Lease Road:**

Type	Access				
comment:	Maintain lease road until final reclamation is approved. Begin reclamation process.				
Corrective ActionL				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:	Remove all equipment from location and begin reclamation process. Contact COGCC Reclamation Group for directive or when ready for inspection.				
Corrective Action:				Date:	

**Tanks and Berms:**

Contents	#	Capacity	Type	Tank ID	SE GPS	
Comment:	Remove all tanks and equipment at battery and begin reclamation process.					
Corrective Action:				Date:		

**Paint**

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

**Berms**

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance	
Comment:					
Corrective Action:				Date:	

<b>Venting:</b>			
Yes/No			
Comment:			
Corrective Action:		Date:	

<b>Flaring:</b>			
Type			
Comment:			
Corrective Action:		Date:	

**Inspected Facilities**

Facility ID: 226333 Type: WELL API Number: 087-07069 Status: SI Insp. Status: PA

**Cement**

Cement Contractor

Contractor Name: Yetter Well Service

Contractor Phone: 970-522-2885

Surface Casing

Cement Volume (sx): 100+15

Circulate to Surface: YES

Cement Fall Back: \_\_\_\_\_

Top Job, 1" Volume: \_\_\_\_\_

Intermediate Casing

Cement Volume (sxs): \_\_\_\_\_

Good Return During Job: \_\_\_\_\_

Production Casing

Cement Volume (sx): 2+40

Good Return During Job: YES

Plugging Operations

Depth Plugs(feet range): 5118,1200,223

Cement Volume (sx): 2+40+100+15

Good Return During Job: YES

Cement Type: II

Comment: Safety meeting w/daily work plan, well psi = 0, tagged cement @ (21.5'), pumped (15) sks cement to surface, secured well, RDMO. Well P&A COMPLETED - NO PROBLEMS

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:

Corrective Action:

Date: \_\_\_\_\_

**Pits:**  NO SURFACE INDICATION OF PIT

**COGCC Comments**

Comment	User	Date
P&A Day (3) COMPLETED - NO PROBLEMS Awaiting cut/cap/backfill. Contact COGCC Flowline Group for directives, begin reclamation process. Contact COGCC Reclamation Group for directives or when ready for reclamation inspection.	schureky	09/18/2019