

**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:

09/24/2019

Submitted Date:

10/06/2019

Document Number:

688305871

FIELD INSPECTION FORM

Loc ID 317088 Inspector Name: Sherman, Susan 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: 76830
Name of Operator: SCHMID PROPERTIES INC
Address: PO BOX 389
City: HICO State: TX Zip: 76457

Findings:

- 10 Number of Comments
- 1 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
Sutphin, Dirk		dirk.sutphin@state.co.us	COGCC Engineer
Schmid, William	337-261-1500	tenniswilliam123@cs.com	
Walker, Carolyn	254-796-2100	schmidprop@gmail.com	

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
236071	WELL	PR	06/04/1971	OW	121-08561	CLARK 8-35	PR

General Comment:

Routine Inspection

Location

Overall Good:

Signs/Marker:

Type	WELLHEAD		
Comment:			
Corrective Action:		Date:	
Type	BATTERY		
Comment:			
Corrective Action:		Date:	
Type	TANK LABELS/PLACARDS		
Comment:			
Corrective Action:		Date:	

Emergency Contact Number:

Comment: 377-261-1500 and 970-554-1988 (check that all emergency contact numbers are current)

Corrective Action: Date: _____

Overall Good:

Spills:

Type	Area	Volume		

In Containment: No

Comment:

Multiple Spills and Releases?

Fencing/:

Type	PUMP JACK		
Comment:	wire panels		
Corrective Action:		Date:	

Equipment:

Type			corrective date
Type: Prime Mover	# 1		
Comment:			
Corrective Action:		Date:	
Type: Deadman # & Marked	# 4		
Comment:			
Corrective Action:		Date:	
Type: Bird Protectors	# 2		
Comment:			
Corrective Action:		Date:	
Type: Pump Jack	# 1		
Comment:			
Corrective Action:		Date:	
Type: Vertical Heater Treater	# 1		

Comment:	bermed, propane	Date:	
Corrective Action:		Date:	

Tanks and Berms:

Contents	#	Capacity	Type	Tank ID	SE GPS
PRODUCED WATER	1	300 BBLs	Open Top		,
Comment:	netted on top				
Corrective Action:					Date:

Paint

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

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Comment:	same berms as crude oil tank			
Corrective Action:				Date:

Contents	#	Capacity	Type	Tank ID	SE GPS
PRODUCED WATER	1	200 BBLs	PBV FIBERGLASS		,
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:

Contents	#	Capacity	Type	Tank ID	SE GPS
CRUDE OIL	2	300 BBLs	STEEL AST		,
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				
Comment:				
Corrective Action:				Date:

Flaring:				
Type				
Comment:				
Corrective Action:				Date:

Location Construction

Location ID: 236071 CDP: _____

Comment: _____

Corrective Action: _____

Date: _____

Form 2A COAs:

Comment: No COAs.

Corrective Action: _____

Date: _____

Wildlife BMPs:

Comment: _____

Corrective Action: _____

Date: _____

Comment: _____

Corrective Action: _____

Date: _____

On Site Inspection (305):

Surface Owner Contact Information:

Name: _____ Address: _____

Phone Number: _____ Cell Phone: _____

Operator Rep. Contact Information:

Landman Name: _____ Phone Number: _____

Date Onsite Request Received: _____ Date of Rule 306 Consultation: _____

Request LGD Attendance: _____

LGD Contact Information:

Name: _____ Phone Number: _____ Agreed to Attend: _____

Summary of Landowner Issues:

Summary of Operator Response to Landowner Issues:

Onsite Inspection Memorandum Summarizing Discussions at Inspection as Attachment:

Inspected Facilities

Facility ID: 236071 Type: WELL API Number: 121-08561 Status: PR Insp. Status: PR

Producing Well

Comment: [PR. Jun 2019 production reported to COGCC database. There is a gap in reported production between Jun 2008 and Mar 2012-contact COGCC Engineering.](#)

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

Comment:

Corrective Action:

Date: _____

Pits: NO SURFACE INDICATION OF PIT

Type: Produced Water Lined: NO Pit ID: _____ Lat: _____ Long: _____

Reference Point: _____ Other: _____ Length: _____ Width: _____

Lining:

Liner Type: _____ Liner Condition: _____

Comment:

Corrective Action:

Date: _____

Fencing:

Fencing Type: None Fencing Condition: _____

Comment:

Corrective Action:

Date: _____

Netting:

Netting Type: _____ Netting Condition: _____

Comment:

Corrective Action:

Date: _____

Anchor Trench Present: _____ Oil Accumulation: NO 2+ feet Freeboard: YES

Comment:

Corrective Action:

Date: _____

Type: Skimming/Settling Lined: NO Pit ID: _____ Lat: _____ Long: _____

Reference Point: _____ Other: _____ Length: _____ Width: _____

Lining:

Liner Type: _____ Liner Condition: _____

Comment:

Corrective Action:

Date: _____

Fencing:

Fencing Type: None Fencing Condition: _____

Comment:

Corrective Action:

Date: _____

Netting:

Netting Type: _____ Netting Condition: _____

Comment:

Corrective Action:

Date: _____

Anchor Trench Present:	Oil Accumulation: <u>YES</u>	2+ feet Freeboard: <u>YES</u>
Comment:	Oil on skim pit, not netted. Fix hole in fiberglass tank (see attached photo). Check that vent pipe in tank has bird cover.	
Corrective Action	Pumper was contacted on day of inspection and sent truck to clean oil from pit. Inspector needs to reinspect.	Date: <u>09/25/2019</u>
Type: <u>Produced Water</u>	Lined: <u>NO</u>	Pit ID: _____ Lat: _____ Long: _____
Reference Point: _____	Other: _____	Length: _____ Width: _____
Lining:		
Liner Type:	Liner Condition:	
Comment:	_____	
Corrective	_____	Date: _____
Fencing:		
Fencing Type: <u>None</u>	Fencing Condition:	
Comment:	_____	
Corrective	_____	Date: _____
Netting:		
Netting Type:	Netting Condition:	
Comment:	_____	
Corrective	_____	Date: _____
Anchor Trench Present:	Oil Accumulation: <u>NO</u>	2+ feet Freeboard: <u>YES</u>
Comment:	_____	
Corrective	_____	Date: _____

Attached Documents

You can go to COGCC Images (<https://cogcc.state.co.us/weblink/>) and search by document number:

Document Num	Description	URL
688305961	Schmid Properties Clark 8-35	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4956148