

**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:

12/02/2019

Submitted Date:

12/09/2019

Document Number:

680306002

**FIELD INSPECTION FORM**

Loc ID 304899 Inspector Name: SCHURE, KYM On-Site Inspection ☐ 2A Doc Num: \_\_\_\_\_

**Operator Information:**

OGCC Operator Number: 66190

Name of Operator: OMIMEX PETROLEUM INC

Address: 7950 JOHN T WHITE ROAD

City: FORT WORTH State: TX Zip: 76120

**Status Summary:**

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

**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 |
|----------------|--------------|-------------------------------|---------|
| Fisher, Jeremy | 970-854-4733 | Jeremy_Fisher@omimexgroup.com |         |

**Inspected Facilities:**

| Facility ID | Type | Status | Status Date | Well Class | API Num   | Facility Name     | Insp Status |
|-------------|------|--------|-------------|------------|-----------|-------------------|-------------|
| 275916      | WELL | PR     | 02/01/2015  | GW         | 125-09117 | BLEDSON 15-7-3-43 | PR          |

**General Comment:**

Routine Site Inspection

### Location

|                    |                     |       |  |
|--------------------|---------------------|-------|--|
| <b>Lease Road:</b> |                     |       |  |
| Type               | Access              |       |  |
| comment:           | Two track grassland |       |  |
| Corrective Action  |                     | Date: |  |

Overall Good: ☐

|                      |              |       |  |
|----------------------|--------------|-------|--|
| <b>Signs/Marker:</b> |              |       |  |
| Type                 | WELLHEAD     |       |  |
| Comment:             | Satisfactory |       |  |
| Corrective Action:   |              | Date: |  |

|                           |              |             |
|---------------------------|--------------|-------------|
| Emergency Contact Number: |              |             |
| Comment:                  | Satisfactory |             |
| Corrective Action:        |              | Date: _____ |

Overall Good: ☒

|                |      |        |  |  |
|----------------|------|--------|--|--|
| <b>Spills:</b> |      |        |  |  |
| Type           | Area | Volume |  |  |

In Containment: No

Comment: ☐ Multiple Spills and Releases?

|                    |             |       |  |
|--------------------|-------------|-------|--|
| <b>Fencing/:</b>   |             |       |  |
| Type               | PUMP JACK   |       |  |
| Comment:           | Steel panel |       |  |
| Corrective Action: |             | Date: |  |

|                    |                                    |       |                 |
|--------------------|------------------------------------|-------|-----------------|
| <b>Equipment:</b>  |                                    |       | corrective date |
| Type: Other        | # 0                                |       |                 |
| Comment:           | No change in equipment inventoried |       |                 |
| Corrective Action: |                                    | Date: |                 |

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

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

| Inspected Facilities |        |       |      |             |           |         |    |               |    |
|----------------------|--------|-------|------|-------------|-----------|---------|----|---------------|----|
| Facility ID:         | 275916 | Type: | WELL | API Number: | 125-09117 | Status: | PR | Insp. Status: | PR |
| Producing Well       |        |       |      |             |           |         |    |               |    |
| Comment:             | GW     |       |      |             |           |         |    |               |    |
| 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