



02496685

# OIL & GAS CONSERVATION COMMISSION

## EAST REGION FIELD INSPECTION REPORT



NOTICE OF UNSATISFACTORY INSPECTION

337 Cambridge

NOTICE OF SATISFACTORY INSPECTION

Brush, CO 80723 970-842-4465

Date: 5-1-8	Facility ID:	Operator: UN/2 NOWIN
Location: NWNE 3-9N-54W	Lease Name: Reike-1	
API Number: 05 - 075 08168	Inspector: ED BINKLEY	Cell: 970-380-2683
INSP TYPE HR	INSP STATUS DA	PA <input checked="" type="radio"/> N
	PASS/FAIL <input checked="" type="radio"/> F	VIOLATION Y <input checked="" type="radio"/> N
NOV Y N		
UIC VIOL TYPE UA MI OP PA OT	TBG/PKR LK <input type="checkbox"/>	CSG LK <input type="checkbox"/>
ALL UIC VIOLATIONS REQUIRE NOAVS		

<b>Well ID Signs</b> (Rule 210) Y N	Comments:	<b>Fences</b> Y N	Comments:
		(Rule 603.b.(7), 1002.a)	

<b>Production Pits</b> (Rule 902, 903, 904) EARTHEN PITS ONLY	Produced Water Pits Total # _____ Oil Accumulation? <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/>
	Comments: _____
	Skimming/Settling Pits Total # _____ Covered # _____ Uncovered # _____
SENSITIVE AREA <input type="checkbox"/> YES <input type="checkbox"/> NO	Special Purpose Pits Total # _____ Lined # _____ Unlined # _____
	Comments: _____

<b>Tank Battery Equipment</b> (Rule 604)	<input type="checkbox"/>
BURIED OR PARTIALLY BURIED VESSELS : #STEEL #FIBERGLASS #CONCRETE #OTHER	

<b>Fire Walls/Berms/Dikes</b> [Rule 604.a.(4)]	<input type="checkbox"/>
---	--------------------------

<b>General Housekeeping</b> (Rule 603.g)	<input type="checkbox"/>
---	--------------------------

<b>Spills (Oil/Water)</b> (Rule 906)	<input type="checkbox"/>
---	--------------------------

<b>UIC Routine Inspection</b> FILL OUT FORM 21 WHEN WITNESSING MIT	Inj. Pressure _____ Psig T-C Ann. Pressure _____ Psig	COMMENTS
--	--	----------

<b>Drilling Well/Workover</b> (Rule 317)	<input type="checkbox"/>
---	--------------------------

<b>Surface Rehabilitation</b> (Rule 1003, 1004)	cut/fv	<input type="checkbox"/>
--	--------	--------------------------

<b>Miscellaneous</b>	<input type="checkbox"/>
----------------------	--------------------------

RECEIVED  
MAY 18 2008  
OCECC

### CORRECTIVE ACTION REQUIRED:

Date Corrective Action Required By:

Date Remedied:

This report is a Notice of Inspection. The Commission requires that you correct any deficiencies shown on this report in a timely manner. Failure to comply may result in enforcement action by the Commission.