

**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:

12/13/2019

Submitted Date:

12/19/2019

Document Number:

697000279

**FIELD INSPECTION FORM**

Loc ID 466305 Inspector Name: Welsh, Brian 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: 55098  
 Name of Operator: MCCOY PETROLEUM CORPORATION  
 Address: 9342 EAST CENTRAL  
 City: WICHITA State: KS Zip: 67206-

**Findings:**

5 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
Reinhardt, Brent	(316) 425-2339	brent@mccoypetroleum.com	

**Inspected Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
466304	WELL	DG	11/06/2019		017-07809	ALC 1545 1-27	WK

**General Comment:**

[Workover/Cement Inspection](#)

**Location**

**Lease Road:**

Type Access

comment: [Dirt road through CRP](#)

Corrective ActionL

Date:

Overall Good:

**Signs/Marker:**

Type WELLHEAD

Comment: [Lease sign at edge of location](#)

Corrective Action:

Date:

**Emergency Contact Number:**

Comment:

Corrective Action:

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

Overall Good:

**Spills:**

Type	Area	Volume			

In Containment: No

Comment:

Multiple Spills and Releases?

**Venting:**

Yes/No

Comment:

Corrective Action:

Date:

**Flaring:**

Type

Comment:

Corrective Action:

Date:

**Inspected Facilities**

Facility ID: 466304 Type: WELL API Number: 017-07809 Status: DG Insp. Status: WK

**Cement**

Cement Contractor

Contractor Name: Hurricane Services

Contractor Phone: \_\_\_\_\_

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): 50sxs

Good Return During Job: YES

Plugging Operations

Depth Plugs(feet range): \_\_\_\_\_

Cement Volume (sx): \_\_\_\_\_

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

Cement Type: \_\_\_\_\_

Comment: \_\_\_\_\_

Corrective Action: \_\_\_\_\_

Date:

**Workover**

Comment: HSI on location with workover rig and cement trucks to pump squeeze job. RIH W/PACKER AND PUMPED 50SXS CMT, DISP W/30BBLS WATER. SQUEEZED OFF W/2000PSI. REVERSED OUT. PULLED 4 JNTS TBG AND RESET PACKER.

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
Compaction	Pass	Compaction	Pass			

Comment:

Corrective Action:

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

**Pits:**  NO SURFACE INDICATION OF PIT