

**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:

03/30/2020

Submitted Date:

03/31/2020

Document Number:

701000367

FIELD INSPECTION FORM

Loc ID 320992 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: 10626
Name of Operator: DOVER ATWOOD CORPORATION
Address: 1875 HARSH AVENUE SE
City: MASSILLON State: OH Zip: 44646

Findings:

13 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 |
|-----------------|----------------|------------------------|----------------------------------|
| Levengood, John | (330) 809-0630 | jlevengood07@gmail.com | BACA Inspections |
| Crane, Rocky | (719) 529-0682 | rockycrane@yahoo.com | |

Inspected Facilities:

| Facility ID | Type | Status | Status Date | Well Class | API Num | Facility Name | Insp Status |
|-------------|------|--------|-------------|------------|-----------|---------------|-------------|
| 205707 | WELL | PR | 01/01/2017 | GW | 009-06118 | HUME 1 | PR |

General Comment:

[Routine Inspection](#)

| Location | | | |
|--|---|--------|-----------------|
| Lease Road: | | | |
| Type | Access | | |
| comment: | Dirt road through farm ground | | |
| Corrective Action: | | | Date: |
| Overall Good: <input checked="" type="checkbox"/> | | | |
| Signs/Marker: | | | |
| Type | WELLHEAD | | |
| Comment: | Lease sign by water tank | | |
| Corrective Action: | | | Date: |
| Emergency Contact Number: | | | |
| Comment: | | | |
| Corrective Action: | | | Date: _____ |
| Good Housekeeping: | | | |
| Type | UNUSED EQUIPMENT | | |
| Comment: | Unused equipment removed from location | | |
| Corrective Action: | | | Date: |
| Type | WEEDS | | |
| Comment: | Some weeds have been maintained. Finish removing dead weeds | | |
| Corrective Action: | | | Date: |
| Overall Good: <input checked="" type="checkbox"/> | | | |
| Spills: | | | |
| Type | Area | Volume | |
| In Containment: No | | | |
| Comment: | | | |
| <input type="checkbox"/> Multiple Spills and Releases? | | | |
| Fencing/: | | | |
| Type | OTHER | | |
| Comment: | Pipe fence around meter shed | | |
| Corrective Action: | | | Date: |
| Type | PUMP JACK | | |
| Comment: | Wire panels around unit and wellhead | | |
| Corrective Action: | | | Date: |
| Equipment: | | | |
| Type: Gas Meter Run | # 1 | | corrective date |
| Comment: | | | |
| Corrective Action: | | | Date: |
| Type: Pump Jack | # 1 | | |
| Comment: | Cabot unit | | |

| | | | |
|---------------------------|---|-------|--|
| Corrective Action: | | Date: | |
| Type: Prime Mover | # 0 | | |
| Comment: | Removed from unit | | |
| Corrective Action: | | Date: | |
| Type: Ancillary equipment | # 2 | | |
| Comment: | Gas scrubber (disconnected and not in use) and solar powered cathodic rectifier | | |
| Corrective Action: | | Date: | |

Tanks and Berms:

| Contents | # | Capacity | Type | Tank ID | SE GPS |
|--------------------|--|----------|----------|---------|-----------------------|
| PRODUCED WATER | 1 | OTHER | Open Top | | 37.243130,-102.178180 |
| Comment: | Fiberglass open top water tank. Tank is empty, disconnected and not in use at time of inspection | | | | |
| Corrective Action: | | | | | Date: |

Paint

| | |
|------------------|--|
| Condition | |
| Other (Content) | |
| Other (Capacity) | |
| Other (Type) | |

Berms

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

Venting:

| | | |
|--------------------|----|-------|
| Yes/No | NO | |
| Comment: | | |
| Corrective Action: | | Date: |

Flaring:

| | |
|--------------------|-------|
| Type | |
| Comment: | |
| Corrective Action: | Date: |

Inspected Facilities

Facility ID: 205707 Type: WELL API Number: 009-06118 Status: PR Insp. Status: PR

Producing Well

Comment: [Producing. Casing production](#)

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