

**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:

04/13/2020

Submitted Date:

04/13/2020

Document Number:

701000469

FIELD INSPECTION FORM

Loc ID 321653 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: 96730
Name of Operator: WILLIFORD ENERGY COMPANY
Address: 6060 AMERICAN PLAZA SUITE 760
City: TULSA State: OK Zip: 74135

Findings:

- 10 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 |
|----------------|--------------|------------------------------|---------|
| Hubbard, Corky | 806-658-9758 | whubbard@willifordenergy.com | |

Inspected Facilities:

| Facility ID | Type | Status | Status Date | Well Class | API Num | Facility Name | Insp Status |
|-------------|------|--------|-------------|------------|-----------|------------------|-------------|
| 207687 | WELL | PR | 09/18/1986 | OW | 017-06622 | RHOADES UNIT 5-4 | PR |

General Comment:

Routine Inspection

Empty area for additional notes or observations.

Location

| | | | |
|--------------------|-----------------------------|--|-------|
| Lease Road: | | | |
| Type | Access | | |
| comment: | Gravel road through pasture | | |
| Corrective Action | | | Date: |

Overall Good:

| | | | |
|----------------------|-----------------------------|--|-------|
| Signs/Marker: | | | |
| Type | CONTAINERS | | |
| Comment: | Sticker on chemical drum | | |
| Corrective Action: | | | Date: |
| Type | WELLHEAD | | |
| Comment: | Lease sign mounted to fence | | |
| Corrective Action: | | | Date: |

Emergency Contact Number:

Comment:

Corrective Action:

Date: _____

Overall Good:

| | | | | |
|----------------|------|--------|--|--|
| Spills: | | | | |
| Type | Area | Volume | | |

In Containment: No

Comment:

Multiple Spills and Releases?

| | | | |
|--------------------|---------------------------------|--|-------|
| Fencing/: | | | |
| Type | OTHER | | |
| Comment: | Metal panels around line heater | | |
| Corrective Action: | | | Date: |
| Type | WELLHEAD | | |
| Comment: | Metal panels around wellhead | | |
| Corrective Action: | | | Date: |

| | | | |
|---------------------------|--|--|-----------------|
| Equipment: | | | corrective date |
| Type: Pump Jack | # 1 | | |
| Comment: | Lufkin 320 | | |
| Corrective Action: | | | Date: |
| Type: Ancillary equipment | # 5 | | |
| Comment: | Gas scrubber, chemical drum w/containment, cathodic rectifier, line heater, day drum | | |
| Corrective Action: | | | Date: |
| Type: Prime Mover | # 1 | | |
| Comment: | Ajax gas engine | | |
| Corrective Action: | | | Date: |

| | | | |
|--------------------------|-----|-------|--|
| Type: Deadman # & Marked | # 4 | | |
| Comment: | | | |
| Corrective Action: | | Date: | |

Venting:

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

Flaring:

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

Inspected Facilities

Facility ID: 207687 Type: WELL API Number: 017-06622 Status: PR Insp. Status: PR

Producing Well

Comment: [Producing. Central tank battery for \(Rhoades 5-4, 5-32, 7-32, 6-32, 13-31 #2, 44-31 #5\) 4635' W @ 38.877860/-102.814420](#)

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 | Pass | Gravel | Pass | Material Handling And Spill Prevention | Pass | |

Comment:

Corrective Action:

Date: _____

Pits: NO SURFACE INDICATION OF PIT