

**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:

06/16/2020

Submitted Date:

06/16/2020

Document Number:

701000906

FIELD INSPECTION FORM

Loc ID 321852 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: 72185
Name of Operator: PRODUCTION MANAGEMENT INC
Address: 5000 BUTTE ST #107
City: BOULDER State: CO Zip: 80301

Findings:

6 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 |
|-----------------|--------------|---------------------------|---------|
| Warren, William | 303-449-0557 | williamwarren@hotmail.com | |
| Quint, Craig | | craig.quint@state.co.us | |

Inspected Facilities:

| Facility ID | Type | Status | Status Date | Well Class | API Num | Facility Name | Insp Status |
|-------------|------|--------|-------------|------------|-----------|--------------------|-------------|
| 208225 | WELL | IJ | 01/01/2017 | DSPW | 017-07160 | COE TRUST 12B-18 2 | AC |

General Comment:

[Routine UIC Inspection](#)

Location

Lease Road:

Type Access

comment: Trail through farm ground

Corrective ActionL

Date:

Overall Good:

Signs/Marker:

Type WELLHEAD

Comment: Lease sign by wellhead

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 YES

Comment: 2" vent on tubing

Corrective Action:

Date:

Flaring:

Type

Comment:

Corrective Action:

Date:

Inspected Facilities

Facility ID: 208225 Type: WELL API Number: 017-07160 Status: IJ Insp. Status: AC

Underground Injection Control

UIC Violation: _____ Maximum Injection Pressure: _____

UIC Routine

| | | | |
|------------|---|------------------------------|-----------------------------|
| Inj./Tube: | Pressure or inches of Hg <u>2 PSIG</u> (e.g. 30 psig or -30" Hg) | Previous Test Pressure _____ | MPP _____ |
| TC: | Pressure or inches of Hg <u>0 PSIG</u> | Previous Test Pressure _____ | Inj Zone: <u>STLSP</u> |
| Brhd: | Pressure or inches of Hg _____ | Previous Test Pressure _____ | Last MIT: <u>05/27/2014</u> |
| | | | AnnMTReq: <u>NO</u> |

Comment: CASING HAD A LIGHT BLOW, DIED IMMEDIATELY. TBG IJ @ 2 PSIG

Corrective Action: _____ Date: _____

Method of Injection: GRAVITY FEED

Test Type: _____ Tbg psi: _____ Csg psi: _____ BH psi: _____

Insp. Status: _____

Comment: _____

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 |
|------------------|-----------------|-------------------------|-----------------------|---------------|--------------------------|---------|
| Other | Pass | Other | Pass | | | |

Comment: [Location and access are farmed over](#)

Corrective Action:

Date: _____

Pits: NO SURFACE INDICATION OF PIT