

Location

Overall Good:

Signs/Marker:

Type	CONTAINERS		
Comment:	Adequate		
Corrective Action:		Date:	
Type	BATTERY		
Comment:	Adequate		
Corrective Action:		Date:	
Type	TANK LABELS/PLACARDS		
Comment:	Adequate		
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	LOCATION		
Comment:	Barbed Wire		
Corrective Action:		Date:	

Equipment:

Type: Prime Mover	# 3		corrective date
Comment:	Electric Injection Pumps		
Corrective Action:		Date:	

Tanks and Berms:

Contents	#	Capacity	Type	Tank ID	SE GPS
CRUDE OIL	2	400 BBLs	STEEL AST		40.809040,-103.831830
Comment:	<input type="text"/>				
Corrective Action:				Date:	

Paint

Condition	Adequate	
Other (Content)	<input type="text"/>	
Other (Capacity)	<input type="text"/>	
Other (Type)	<input type="text"/>	

<u>Berms</u>						
Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance		
Metal	Adequate	Walls Sufficent	Base Sufficent	Adequate		
Comment:						
Corrective Action:				Date:		
Contents	#	Capacity	Type	Tank ID	SE GPS	
PRODUCED WATER	2	1000 BBLS	FIBERGLASS AST		,	
Comment:						
Corrective Action:				Date:		

<u>Paint</u>						
Condition	Adequate					
Other (Content)						
Other (Capacity)						
Other (Type)						

<u>Berms</u>						
Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance		
Comment:						
Corrective Action:				Date:		
Contents	#	Capacity	Type	Tank ID	SE GPS	
PRODUCED WATER	12	OTHER	STEEL AST		40.809270,-103.831840	
Comment:						
Corrective Action:				Date:		

<u>Paint</u>						
Condition	Adequate					
Other (Content)						
Other (Capacity)	750 BBLS					
Other (Type)						

<u>Berms</u>						
Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance		
Metal	Adequate	Walls Sufficent	Base Sufficent	Adequate		
Comment:						
Corrective Action:				Date:		

<u>Venting:</u>						
Yes/No	NO					
Comment:						
Corrective Action:					Date:	

<u>Flaring:</u>						
Type						
Comment:						

Corrective Action:

Date:

Inspected Facilities

Facility ID: 440165 Type: LOCATION API Number: - Status: AC Insp. Status: AC

Underground Injection Control

UIC Violation: _____ Maximum Injection Pressure: _____

UIC Routine

Inj./Tube:	Pressure or inches of Hg _____ (e.g. 30 psig or -30" Hg)	Previous Test Pressure _____	MPP _____
TC:	Pressure or inches of Hg _____	Previous Test Pressure _____	Inj Zone: _____
Brhd:	Pressure or inches of Hg _____	Previous Test Pressure _____	Last MIT: _____
			AnnMTReq: _____

Comment: [Active Water Disposal. Refer to FIR #696302336 for the Well Inspection](#)

Corrective Action: _____ Date: _____

Method of Injection: _____

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
Gravel		Gravel				

Comment:

Corrective Action:

Date: _____

Pits: NO SURFACE INDICATION OF PIT

COGCC Comments

Comment	User	Date
Routine Annual Field Inspection. Active Water Disposal Facility.	petrie	08/28/2020

Attached Documents

You can go to COGCC Images (<https://cogcc.state.co.us/weblink/>) and search by document number:

Document Num	Description	URL
696302339	Photos	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=5234509