

SWMP INSPECTION REPORTING FORM

Well Name: Weigel 29-01 Line Leak 11-3-20 Legal Description: NENE/4 SEC 29-T01N-R44W

Reason for Routine Inspection: ___ 14-Day Interval X 30-Day Interval. ___ Significant Storm Event.

Spill Point ID: 478494

Remediation # 16193

Weather information since last inspection was held.

Event	Date Began	Amount (Inches)		Event	Date Began	Amount (Inches)
1				2		
3				4		

Best Management Practices	Overall Condition	Need Repair	G=Good, F=Fair, P=Poor, N/A=Not Applicable Comments
Perimeter BMPs			
Straw Bales/Rolls	G F P <u>(N/A)</u>	Y <u>(N)</u>	
Silt Fence	G F P <u>(N/A)</u>	Y <u>(N)</u>	
Berms/Dikes/Ditches	G F P <u>(N/A)</u>	Y <u>(N)</u>	
Slope BMPs			
Surface Roughening	<u>(G)</u> F P N/A	Y <u>(N)</u>	<i>60% cover will spread straw and rock gypsum</i>
Straw mulch	G F <u>(P)</u> N/A	<u>(Y)</u> N	
Perennial Vegetation	G <u>(P)</u> N/A	<u>(Y)</u> N	

Will existing BMPs need to be modified or removed or additional BMPs Installed? YES (NO)
If yes, list the action items to be completed on the table below.

Are uncontrolled releases of mud or sediment from the site evident? YES (NO)
If yes, what corrective actions are to occur – describe on table below.

Are non-compliance incidents evident? YES NO If no, sign the certification at the bottom of this form: If yes, describe actions to be completed below.

Actions to be Completed	Date Completed
1	
2	
3	

I certify the site is in compliance with the SWMP and this permit: E. REPUBLICAN/JL

Old Permit: COR 03H496/ New Permit: COR 403419

Inspection completed on 11/30/2021

by: *Jim Sigurd*

Title of inspector: Lease Attendant

Nov 12-29-21

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Silt Fence	G F P <u>N/A</u>	Y <u>N</u>	
Berms/Dikes/Ditches	G F P <u>N/A</u>	Y <u>N</u>	
Slope BMPs			
Surface Roughening	<u>G</u> F P N/A	Y <u>N</u>	<i>deficient cover of perennial Vegetation will be reseed and spread gypsum</i>
Straw mulch	G F P <u>N/A</u>	Y <u>N</u>	
Perennial Vegetation	G <u>F</u> P N/A	<u>Y</u> N	

Will existing BMPs need to be modified or removed or additional BMPs installed? YES NO
If yes, list the action items to be completed on the table below.

Are uncontrolled releases of mud or sediment from the site evident? YES NO
If yes, what corrective actions are to occur – describe on table below.

Are non-compliance incidents evident? YES NO If no, sign the certification at the bottom of this form: If yes, describe actions to be completed below.

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I certify the site is in compliance with the SWMP and this permit: E. REPUBLICAN/JL

Old Permit: COR 03H496/ New Permit: COR 403419

Inspection completed on 10/30/2021

by: *[Signature]*
11-16-21

Title of inspector: Lease Attendant

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Silt Fence	G F P <u>N/A</u>	Y <u>N</u>	
Berms/Dikes/Ditches	G F P <u>N/A</u>	Y <u>N</u>	
Slope BMPs			
Surface Roughening	<u>G</u> F P N/A	Y <u>N</u>	<i>Recent cover of perennial veg Vegetation will reseed and spread gypsum</i>
Straw mulch	G F P <u>N/A</u>	Y <u>N</u>	
Perennial Vegetation	G <u>F</u> P N/A	<u>Y</u> N	

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I certify the site is in compliance with the SWMP and this permit: E. REPUBLICAN/JL

Old Permit: COR 03H496 / New Permit: COR 403419

Inspection completed on 09/30/2021

by: *[Signature]*

Title of inspector: Lease Attendant

[Signature] 11-16-21