

**FORM
INSP**

Rev
X/20

**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:

09/08/2022

Submitted Date:

09/09/2022

Document Number:

688313110

FIELD INSPECTION FORM

Loc ID: 309592 Inspector Name: Sherman, Susan 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: 61250
Name of Operator: MULL DRILLING COMPANY INC
Address: 1700 N WATERFRONT PKWY B#1200
City: WICHITA State: KS Zip: 67206-

Findings:

- 11 Number of Comments
- 1 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
OBryhim, Reesa		ROBryhim@mulldrilling.com	All Inspections
Beilman, James	316-734-8108	jbeilman@mulldrilling.com	Environmental/Safety
Brown, Ray	719-343-5186	rbrown@mulldrilling.com	

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
218117	WELL	PR	04/01/2018	OW	073-06102	BRAUKMANN FARMS CORP 3	PR

General Comment:

[Routine Field Inspection](#)

[Chemical leaking at pumping unit, leak at wellhead pipe valve, offsite sediment transport at well location to drainage, and no bullplugs/caps on tank loadouts \(see attached photos\).](#)

[Document #402921001 04 \(-DOC\) -00 Attachment count: 6 IN PROCESS 1/8/2022 1/8/2022 MULL DRILLING COMPANY INC.](#)

Location

Overall Good:

Signs/Marker:

Type	CONTAINERS		
Comment:			
Corrective Action:		Date:	
Type	TANK LABELS/PLACARDS		
Comment:			
Corrective Action:		Date:	
Type	BATTERY		
Comment:			
Corrective Action:		Date:	
Type	WELLHEAD		
Comment:			
Corrective Action:		Date:	
Type	OTHER		
Comment:	Other safety signs at wellhead and tank battery (see attached photos)		
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	TANK BATTERY		
Comment:			
Corrective Action:		Date:	
Type	WELLHEAD		
Comment:			
Corrective Action:		Date:	
Type	PUMP JACK		
Comment:			
Corrective Action:		Date:	

Equipment:

Type: Gas Meter Run	# 1		corrective date
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Comment:			
Corrective Action:			Date:
Type: Bird Protectors	# 7		
Comment:			
Corrective Action:			Date:
Type: Deadman # & Marked	# 4		
Comment:			
Corrective Action:			Date:
Type: FWKO	# 1		
Comment:			
Corrective Action:			Date:
Type: Pump Jack	# 1		
Comment:			
Corrective Action:			Date:
Type: Bradenhead	# 1		
Comment:			
Corrective Action:			Date:
Type: Emission Control Device	# 1		
Comment:	on, propane		
Corrective Action:			Date:
Type: Prime Mover	# 1		
Comment:	electric motor		
Corrective Action:			Date:

Tanks and Berms:

Contents	#	Capacity	Type	Tank ID	SE GPS
PRODUCED WATER	1	200 BBLs	FIBERGLASS AST		,
Comment:					
Corrective Action:					Date:

Paint

Condition	Adequate	
Other (Content)		
Other (Capacity)		
Other (Type)		

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Earth	Adequate	Walls Sufficient		
Comment:				
Corrective Action:				Date:

Contents	#	Capacity	Type	Tank ID	SE GPS
CRUDE OIL	2	400 BBLs	HEATED STEEL AST		,

Comment:		
Corrective Action:		Date:

Paint

Condition	
Other (Content)	
Other (Capacity)	
Other (Type)	

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Earth	Adequate	Walls Sufficent		
Comment:				
Corrective Action:				Date:

Wells Served By Facilities Above

AirsID

API Number	API Number	AirsID
073-06102		

Venting:

Yes/No		
Comment:		
Corrective Action:		Date:

Flaring:

Type	
Comment:	
Corrective Action:	Date:

Location Construction

Location ID: 218117 CDP: _____

Comment:

Corrective Action:

Date: _____

Form 2A COAs:

Comment: No COAs.

Corrective Action:

Date: _____

Wildlife BMPs:

Comment:

Corrective Action:

Date: _____

Comment:

Corrective Action:

Date: _____

On Site Inspection (305):

Surface Owner Contact Information:

Name: _____ Address: _____

Phone Number: _____ Cell Phone: _____

Operator Rep. Contact Information:

Landman Name: _____ Phone Number: _____

Date Onsite Request Received: _____ Date of Rule 306 Consultation: _____

Request LGD Attendance: _____

LGD Contact Information:

Name: _____ Phone Number: _____ Agreed to Attend: _____

Summary of Landowner Issues:

Summary of Operator Response to Landowner Issues:

Onsite Inspection Memorandum Summarizing Discussions at Inspection as Attachment:

Inspected Facilities

Facility ID: 218117 Type: WELL API Number: 073-06102 Status: PR Insp. Status: PR

Producing Well

Comment: [pr 7/1/2022 production is reported to COGCC database.](#)

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	Fail	Compaction	Pass	Material Handling And Spill Prevention	Fail	
Gravel	Pass	Gravel	Pass	Material Handling And Spill Prevention	Pass	Stuffing box leak jar at wellhead

Comment: [See attached photos of sediment transport from north side of location down to drainage. Chemical pump and pipe connection at wellhead are leaking and need maintenance. No bullplugs/caps on tank loadouts/PCC containers.](#)

Corrective Action: [Install or repair required BMPs per Rule 1002.f\(2\)C. Also Rule 603i.](#)

Date: 09/26/2022

Pits: NO SURFACE INDICATION OF PIT

Attached Documents

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

Document Num	Description	URL
688313114	Mull Braukmann Farms Corp 3	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=5852752