



**COLORADO OIL & GAS CONSERVATION COMMISSION**  
**NORTHEAST REGION FIELD INSPECTION REPORT**



<input type="checkbox"/> NOTICE OF UNSATISFACTORY INSPECTION <input checked="" type="checkbox"/> NOTICE OF SATISFACTORY INSPECTION	<b>337 Cambridge</b> <b>Brush, CO 80723 970-842-4465</b>
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Date: <i>10-4-01</i>	Facility ID:	Operator: <i>B.W. Dr19</i>
Location: <i>SW NE 35-12N-55</i>		Lease Name: <i>Hatch-1</i>
API Number: <i>05-075-08588</i>		Inspector: <b>ED BINKLEY</b> Cell: 970-380-2683
INSP TYPE <i>HR</i>	INSP STATUS <i>DA</i>	PA <input checked="" type="checkbox"/> N
		PASS/FAIL <input checked="" type="checkbox"/> F
		VIOLATION Y <input checked="" type="checkbox"/> N
		NOV Y <input checked="" type="checkbox"/> N
UIC VIOL TYPE	UA MI OP PA OT	TBG/PKR LK <input type="checkbox"/>
		CSG LK <input type="checkbox"/>
<small>ALL UIC VIOLATIONS REQUIRE NOAVS</small>		

<b>Well ID Signs</b> (Rule 210) <input checked="" type="checkbox"/> Y <input type="checkbox"/> N Comments:	<b>Fences</b> <input checked="" type="checkbox"/> Y <input type="checkbox"/> N (Rule 603.b.(7), 1002.a) Comments:
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<b>Production Pits</b> (Rule 902, 903, 904) <b>EARTHEN PITS ONLY</b>  SENSITIVE AREA <input type="checkbox"/> YES <input type="checkbox"/> NO	<table style="width:100%;"> <tr> <td>Produced Water Pits</td> <td>Total # _____</td> <td>Oil Accumulation? <input type="checkbox"/> YES <input type="checkbox"/> NO</td> <td><input type="checkbox"/></td> </tr> <tr> <td>Comments:</td> <td colspan="3">_____</td> </tr> <tr> <td>Skimming/Settling Pits</td> <td>Total # _____</td> <td>Covered # _____</td> <td>Uncovered # _____</td> </tr> <tr> <td>Comments:</td> <td colspan="3">_____</td> </tr> <tr> <td>Special Purpose Pits</td> <td>Total # _____</td> <td>Lined # _____</td> <td>Unlined # _____</td> </tr> <tr> <td>Comments:</td> <td colspan="3">_____</td> </tr> </table>	Produced Water Pits	Total # _____	Oil Accumulation? <input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/>	Comments:	_____			Skimming/Settling Pits	Total # _____	Covered # _____	Uncovered # _____	Comments:	_____			Special Purpose Pits	Total # _____	Lined # _____	Unlined # _____	Comments:	_____		
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Comments:	_____																								

<b>Tank Battery Equipment</b> (Rule 604)	<input type="checkbox"/>
BURIED OR PARTIALLY BURIED VESSELS : #STEEL    #FIBERGLASS    #CONCRETE    #OTHER	

<b>Fire Walls/Berms/Dikes</b> [Rule 604.a.(4)]	<input type="checkbox"/>
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<b>General Housekeeping</b> (Rule 603.g)	<input type="checkbox"/>
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<b>Spills (Oil/Water)</b> (Rule 906)	<input type="checkbox"/>
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<b>UIC Routine Inspection</b> FILL OUT FORM 21 WHEN WITNESSING MIT	Inj. Pressure _____ Psig  T-C Ann. Pressure _____ Psig	<b>COMMENTS</b>  <div style="text-align: right; color: blue; font-weight: bold;">       RECEIVED        OCT 11 01        COGCC     </div>
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<b>Drilling Well/Workover</b> (Rule 317)	<input type="checkbox"/>
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<b>Surface Rehabilitation</b> (Rule 1003, 1004)	<input type="checkbox"/>
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<b>Miscellaneous</b>	<input type="checkbox"/>
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<b>CORRECTIVE ACTION REQUIRED:</b>	
Date Corrective Action Required By:	Date Remedied:

**This report is a Notice of Inspection. The Commission requires that you correct any deficiencies shown on this report in a timely manner. Failure to comply may result in enforcement action by the Commission.**