

Location

Overall Good:

Signs/Marker:

Type	WELLHEAD		
Comment:			
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	WELLHEAD		
Comment:			
Corrective Action:		Date:	

Equipment:

Type: Plunger Lift	# 1				corrective date
Comment:					
Corrective Action:		Date:			

Tanks and Berms:

Contents	#	Capacity	Type	Tank ID	SE GPS
			CENTRALIZED BATTERY		
Comment:	Shared battery services location number: 305580				
Corrective Action:		Date:			

Paint

Condition	<input style="width: 95%;" type="text"/>
Other (Content)	<input style="width: 95%;" type="text"/>
Other (Capacity)	<input style="width: 95%;" type="text"/>
Other (Type)	<input style="width: 95%;" type="text"/>

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Comment:				
Corrective Action:		Date:		

Venting:			
Yes/No			
Comment:			
Corrective Action:		Date:	

Flaring:			
Type			
Comment:			
Corrective Action:		Date:	

