

**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:

04/24/2023

Submitted Date:

04/28/2023

Document Number:

701006898**FIELD INSPECTION FORM**Loc ID 321074 Inspector Name: Welsh, Brian On-Site Inspection ☐ 2A Doc Num: \_\_\_\_\_**Operator Information:**OGCC Operator Number: 61650Name of Operator: MURFIN DRILLING COMPANY INCAddress: 250 N WATER ST STE 300City: WICHITA State: KS Zip: 67202**Status Summary:**

- ☐ THIS IS A FOLLOW UP INSPECTION
- ☐ FOLLOW UP INSPECTION REQUIRED
- ☐ NO FOLLOW UP INSPECTION REQUIRED

**Findings:**8 Number of Comments0 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
Morgan, John		john.morgan@state.co.us	
Esquivel, James	620-272-4913	j280189@pld.com	
Goodrich, Cristina	(316) 858-8664	cgoodrich@murfininc.com	
Quint, Craig		craig.quint@state.co.us	

**Inspected Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
205961	WELL	SI	01/01/2019	ERIW	009-06376	S E CAMPO UNIT 402W	SI

**General Comment:**

Routine UIC Inspection

Location				
<b>Lease Road:</b>				
Type	Access			
comment:	Gravel road through pasture			
Corrective Action	L			Date:
Overall Good: <input checked="" type="checkbox"/>				
<b>Signs/Marker:</b>				
Type	WELLHEAD			
Comment:	Lease sign by wellhead			
Corrective Action:				Date:
Emergency Contact Number:				
Comment:				
Corrective Action:				Date: _____
<b>Good Housekeeping:</b>				
Type	STORAGE OF SUPL			
Comment:	Tubing stored on east side of wellhead will need to be removed from location to storage yard			
Corrective Action:				Date:
Overall Good: <input checked="" type="checkbox"/>				
<b>Spills:</b>				
Type	Area	Volume		
In Containment: No				
Comment:				
<input type="checkbox"/> Multiple Spills and Releases?				
<b>Fencing/:</b>				
Type	WELLHEAD			
Comment:	Fencing around wellhead is removed at time of inspection			
Corrective Action:				Date:
Type	OTHER			
Comment:	Pipe fence around cathodic rectifier			
Corrective Action:				Date:
<b>Equipment:</b>				
				corrective date
Type: Deadman # & Marked	# 4			
Comment:				
Corrective Action:				Date:
Type: Ancillary equipment	# 3			
Comment:	Electric panel, cathodic rectifier, water meter on wellhead			
Corrective Action:				Date:
<b>Venting:</b>				
Yes/No				

Comment:			
Corrective Action:		Date:	

Type			
Comment:			
Corrective Action:		Date:	

**Inspected Facilities**Facility ID: 205961 Type: WELL API Number: 009-06376 Status: SI Insp. Status: SI**Underground Injection Control**

UIC Violation: \_\_\_\_\_ Maximum Injection Pressure: \_\_\_\_\_

UIC Routine

Inj./Tube: Pressure or inches of Hg -1" Hg Previous Test Pressure \_\_\_\_\_ MPP \_\_\_\_\_  
(e.g. 30 psig or -30" Hg) Inj Zone: LSNGC

TC: Pressure or inches of Hg 0 PSIG Previous Test Pressure \_\_\_\_\_ Last MIT: 05/16/2017

Brhd: Pressure or inches of Hg \_\_\_\_\_ Previous Test Pressure \_\_\_\_\_ AnnMTReq: NO

Comment: CASING HAD A LIGHT BLOW, DIED IMMEDIATELY. TBG SI W/ -1" Hg  
FIELD IS SI AT TANK BATTERY

Corrective Action: \_\_\_\_\_ Date: \_\_\_\_\_

Method of Injection: PUMP FEED

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	Pass	Gravel	Pass			

Comment:

Corrective Action:

Date:

Pits: ☒ NO SURFACE INDICATION OF PIT