

SWMP INSPECTION REPORTING FORM

Well Name: Brophy 01-12 PA 12-2021 Legal Description: NWSW/4 SEC 1-T0 1S-R44W

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

Remediation #: 19858

Weather information since last inspection was held.

Event	Date Began	Amount (Inches)		Event	Date Began	Amount (Inches)
1	7/19/23	.4 rain		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>	Vegetation ~ 90% Planted to Sunflowers
Straw mulch	G F P <u>N/A</u>	Y <u>N</u>	
Perennial Vegetation	<u>G</u> F P N/A	Y <u>N</u>	

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: Vernon/Jason Bowman

Inspection completed on 07/25/2023

by: Jason Bowman

Title of inspector: Lease Attendant

MS

SWMP INSPECTION REPORTING FORM

Well Name: Brophy 01-12 PA 12-2021 Legal Description: NWSW/4 SEC 1-T0 1S-R44W

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

Remediation #: 19858

Weather information since last inspection was held.

Event	Date Began	Amount (Inches)	Event	Date Began	Amount (Inches)
1	6-4-23	.75	2	6-12-23	.25
3	6-10-23	.25	4	6-17-23	.2

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 <input type="radio"/> N/A	Y <input type="radio"/> N	
Silt Fence	G F P <input type="radio"/> N/A	Y <input type="radio"/> N	
Berms/Dikes/Ditches	G F P <input type="radio"/> N/A	Y <input type="radio"/> N	
Slope BMPs			
Surface Roughening	<input checked="" type="radio"/> G F P N/A	Y <input type="radio"/> N	Vegetation = 20%
Straw mulch	G F P <input type="radio"/> N/A	Y <input type="radio"/> N	
Perennial Vegetation	G <input type="radio"/> F P N/A	Y <input type="radio"/> 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: Vernon/Jason Bowman

Old Permit: COR 039921 / New Permit: COR 403420

Inspection completed on 06/21/2023

by: Jason M. Bowman

Title of inspector: Lease Attendant

SWMP INSPECTION REPORTING FORM

Well Name: Brophy 01-12 PA 12-2021 Legal Description: NWSW/4 SEC 1-T0 1S-R44W

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

Remediation #: 19858

Weather information since last inspection was held.

Event	Date Began	Amount (Inches)		Event	Date Began	Amount (Inches)
1	5/13/23	.5		2		
3	5/17/23	.25		4		

Best Management Practices	Overall Condition	Need Repair	<u>G=Good, F=Fair, P=Poor, N/A=Not Applicable</u> 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>	Vegetation ~ 20%
Straw mulch	G F P <u>N/A</u>	Y <u>N</u>	
Perennial Vegetation	<u>G</u> P N/A	Y N	

Will existing BMPs need to be modified or removed or additional BMPs Installed? YES N

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: Vernon/Jason Bowman

Old Permit: COR 039921 / New Permit: COR 403420

Inspection completed on 05/18/2023 by: Jason M Bowman

Title of inspector: Lease Attendant

SWMP INSPECTION REPORTING FORM

Well Name: Brophy 01-12 PA 12-2021 Legal Description: NWSW/4 SEC 1-T0 1S-R44W

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

Remediation #: 19858

Weather information since last inspection was held.

Event	Date Began	Amount (Inches)		Event	Date Began	Amount (Inches)
1	4/26	.1 inches - Rain		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 N/A	Y <input checked="" type="radio"/> N	<i>Seems good</i>
Silt Fence	G F P N/A	Y <input checked="" type="radio"/> N	
Berms/Dikes/Ditches	<input checked="" type="radio"/> G F P N/A	Y <input checked="" type="radio"/> N	
Slope BMPs			
Surface Roughening	<input checked="" type="radio"/> G F P N/A	Y <input checked="" type="radio"/> N	
Straw mulch	G F P N/A	Y <input checked="" type="radio"/> N	
Perennial Vegetation	G F P N/A	Y <input checked="" type="radio"/> 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: Vernon/Jason Bowman

Old Permit: COR 039921 / New Permit: COR 403420

Inspection completed on 4/10/2023

by: *Jason Bowman*

Title of inspector: Lease Attendant

SWMP INSPECTION REPORTING FORM

Well Name: Brophy 01-12 PA 12-2021 Legal Description: NWSW/4 SEC 1-T0 1S-R44W

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

Remediation #: 19858

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	<u>G=Good, F=Fair, P=Poor, N/A=Not Applicable</u> 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	G F P <u>(N/A)</u>	Y <u>(N)</u>	
Straw mulch	G F P <u>(N/A)</u>	Y <u>(N)</u>	
Perennial Vegetation	G F P <u>(N/A)</u>	Y <u>(N)</u>	

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: Vernon/Tennisen Hoyda

Old Permit: COR 039921 / New Permit: COR 403420

Inspection completed on 03/20/2023 by: Tennisen Hoyda

Title of inspector: Lease Attendant



SWMP INSPECTION REPORTING FORM

Well Name: Brophy 01-12 PA 12-2021 Legal Description: NWSW/4 SEC 1-T0 1S-R44W

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

Remediation #: 19858

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 <u>P</u> N/A	<u>Y</u> N	<i>Needs gypsum powder</i>
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	G F P <u>N/A</u>	Y N	<i>Farmer disturbed the well location</i>
Straw mulch	G F P <u>N/A</u>	Y N	
Perennial Vegetation	G F P <u>N/A</u>	Y 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: Vernon/Tennisen Hoyda

Old Permit: COR 039921 / New Permit: COR 403420

Inspection completed on 02/28/2023

by: Tennisen Hoyda

Title of inspector: Lease Attendant

SWMP INSPECTION REPORTING FORM

Well Name: Brophy 01-12 PA 12-2021 Legal Description: NWSW/4 SEC 1-T0 1S-R44W

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

Remediation #: 19858

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 N	<i>Snow covered</i>
Silt Fence	G F P <u>(N/A)</u>	Y N	
Berms/Dikes/Ditches	G F P <u>(N/A)</u>	Y N	
Slope BMPs			
Surface Roughening	G F P <u>(N/A)</u>	Y N	<i>Snow covered</i>
Straw mulch	G F P <u>(N/A)</u>	Y N	
Perennial Vegetation	G F P <u>(N/A)</u>	Y 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: Vernon/Tennisen Hoyda

Old Permit: COR 039921 / New Permit: COR 403420

Inspection completed on 01/23/2023

by: Tennisen Hoyda

Title of inspector: Lease Attendant

TH

SWMP INSPECTION REPORTING FORM

Well Name: Brophy 01-12 PA 12-2021 Legal Description: NWSW/4 SEC 1-T0 1S-R44W

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

Remediation #: 19858

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 N	<i>Snow covered needs gypsum powder</i>
Silt Fence	G F P <u>N/A</u>	Y N	
Berms/Dikes/Ditches	G F P <u>N/A</u>	Y N	
Slope BMPs			
Surface Roughening	G F P <u>N/A</u>	Y N	<i>Snow covered</i>
Straw mulch	G F P <u>N/A</u>	Y N	
Perennial Vegetation	G F P <u>N/A</u>	Y 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: Vernon/Tennisen Hoyda

Old Permit: COR 039921 / New Permit: COR 403420

Inspection completed on 12/30/2022

by: *Tennisen Hoyda*

Title of inspector: Lease Attendant

TH