

# SWMP INSPECTION REPORTING FORM

Well Name: Brophy J 03-27 Tank Pull    Legal Description: NENE/4 SEC 27-T0 4N-R46W

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

Remediation #: 22082

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
<b>Perimeter BMPs</b>			<i>will continue to watch</i>
Straw Bales/Rolls	G F P N/A	Y <input checked="" type="radio"/>	
Silt Fence	G F P N/A	Y <input checked="" type="radio"/>	
Berms/Dikes/Ditches	G F P N/A	Y <input checked="" type="radio"/>	
<b>Slope BMPs</b>			
Surface Roughening	G F P N/A	Y <input checked="" type="radio"/>	
Straw mulch	G F P N/A	Y <input checked="" type="radio"/>	
Perennial Vegetation	G F P N/A	Y <input checked="" type="radio"/>	

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: ECKLEY WEST/ *mario*

Inspection completed on 08/28/2023    by: Mario Chaparro

Title of inspector: Lease Attendant

*BC*

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Remediation #: 22082

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
<b>Perimeter BMPs</b>			<i>NO change</i>
Straw Bales/Rolls	G F P N/A	Y <u>N</u>	
Silt Fence	G F P N/A	Y <u>N</u>	
Berms/Dikes/Ditches	G F P N/A	Y <u>N</u>	
<b>Slope BMPs</b>			
Surface Roughening	G F P N/A	Y <u>N</u>	
Straw mulch	G F P N/A	Y <u>N</u>	
Perennial Vegetation	G 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: ECKLEY WEST/

Inspection completed on 07/21/2023    by: mar'0 Chaparro

Title of inspector: Lease Attendant

*bc*

# SWMP INSPECTION REPORTING FORM

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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
<b>Perimeter BMPs</b>			
Straw Bales/Rolls	G F P N/A	Y <u>N</u>	<i>No change</i>
Silt Fence	G F P N/A	Y <u>N</u>	
Berms/Dikes/Ditches	G F P N/A	Y <u>N</u>	
<b>Slope BMPs</b>			
Surface Roughening	G F P N/A	Y <u>N</u>	
Straw mulch	G F P N/A	Y <u>N</u>	
Perennial Vegetation	G 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: ECKLEY WEST/

Inspection completed on 06/16 /2023                      by: Mario Chgarrro

Title of inspector: Lease Attendant

*6L*

# SWMP INSPECTION REPORTING FORM

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Remediation #: 22082

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
<b>Perimeter BMPs</b>			
Straw Bales/Rolls	G F P <u>N/A</u>	Y <u>N</u>	<i>Berm is good</i>
Silt Fence	G F P <u>N/A</u>	Y <u>N</u>	
Berms/Dikes/Ditches	<u>G</u> F P N/A	Y <u>N</u>	
<b>Slope BMPs</b>			
Surface Roughening	G F P <u>N/A</u>	Y <u>N</u>	<i>Just needs alot more time, Few weeds are growing</i>
Straw mulch	G F P <u>N/A</u>	Y <u>N</u>	
Perennial Vegetation	G F <u>P</u> 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  
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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: ECKLEY WEST/

Old Permit: COR 039921/ New Permit: COR 403420

Inspection completed on 05/35/2023                      by: Marjo Chaparro

Title of inspector: Lease Attendant

# SWMP INSPECTION REPORTING FORM

Well Name: Brophy J 03-27 Tank Pull    Legal Description: NENE/4 SEC 27-T0 4N-R46W

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

Remediation #: 22082

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
<b>Perimeter BMPs</b>			
Straw Bales/Rolls	G F P N/A	Y <u>N</u>	
Silt Fence	G F P N/A	Y <u>N</u>	
Berms/Dikes/Ditches	G F P N/A	Y <u>N</u>	
<b>Slope BMPs</b>			
Surface Roughening	G F P <u>N/A</u>	Y <u>N</u>	<i>Needs time</i>
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: ECKLEY WEST/

Old Permit: COR 039921 / New Permit: COR 403420

Inspection completed on 8/21/2023    by: Blaine Iv

Title of inspector: Lease Attendant

*BL*

# SWMP INSPECTION REPORTING FORM

Well Name: Brophy J 03-27 Tank Pull    Legal Description: NENE/4 SEC 27-T0 4N-R46W

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

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Best Management Practices	Overall Condition	Need Repair	<u>G=Good, F=Fair, P=Poor, N/A=Not Applicable</u> Comments
<b>Perimeter BMPs</b>			
Straw Bales/Rolls	G F P N/A	Y <input checked="" type="radio"/> N	<b>E</b>
Silt Fence	G F P N/A	Y <input checked="" type="radio"/> N	
Berms/Dikes/Ditches	G F P N/A	Y <input checked="" type="radio"/> N	
<b>Slope BMPs</b>			
Surface Roughening	G F P N/A	Y <input checked="" type="radio"/> N	<i>Dormant Vegetation</i>
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

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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
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I certify the site is in compliance with the SWMP and this permit: ECKLEY WEST/

Old Permit: COR 039921/ New Permit: COR 403420

Inspection completed on 03/23/2023

by: *Wesley*

Title of inspector: Lease Attendant

*HL*

# SWMP INSPECTION REPORTING FORM

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<b>Perimeter BMPs</b>			
Straw Bales/Rolls	G F P <u>N/A</u>	Y N	
Silt Fence	G F P <u>N/A</u>	Y N	
Berms/Dikes/Ditches	G F P <u>N/A</u>	Y N	
<b>Slope BMPs</b>			
Surface Roughening	<u>G</u> F P N/A	Y <u>N</u>	<i>will monitor</i>
Straw mulch	G F P <u>N/A</u>	Y N	
Perennial Vegetation	G <u>F</u> P N/A	Y <u>N</u>	

Will existing BMPs need to be modified or removed or additional BMPs Installed?    YES NO  
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1	
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I certify the site is in compliance with the SWMP and this permit: ECKLEY WEST/Brad Stults

Old Permit: COR 039921/ New Permit: COR 403420

Inspection completed on 01/17/2023    by: Brad Stults

Title of inspector: Lease Attendant

*BS*

# SWMP INSPECTION REPORTING FORM

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Best Management Practices	Overall Condition	Need Repair	G=Good, F=Fair, P=Poor, N/A=Not Applicable Comments
<b>Perimeter BMPs</b>			
Straw Bales/Rolls	G F P <u>N/A</u>	Y N	Will monitor
Silt Fence	G F P <u>N/A</u>	Y N	
Berms/Dikes/Ditches	G F P <u>N/A</u>	Y N	
<b>Slope BMPs</b>			
Surface Roughening	<u>G</u> F P N/A	Y <u>N</u>	Will monitor
Straw mulch	G F P <u>N/A</u>	Y N	
Perennial Vegetation	G <u>P</u> N/A	Y <u>N</u>	

Will existing BMPs need to be modified or removed or additional BMPs Installed? YES NO  
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I certify the site is in compliance with the SWMP and this permit: ECKLEY WEST/Brad Stults

Old Permit: COR 039921 / New Permit: COR 403420

Inspection completed on 12/28/2022

by: Brad Stults BS

Title of inspector: Lease Attendant