

**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:

04/29/2025

Submitted Date:

04/29/2025

Document Number:

715202287

FIELD INSPECTION FORM

Loc ID 321853 Inspector Name: Welsh, Brian On-Site Inspection 2A Doc Num: _____

Status Summary:

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

Operator Information:

ECMC Operator Number: 61250
Name of Operator: MULL DRILLING COMPANY INC
Address: 1700 N WATERFRONT PKWY B#1200
City: WICHITA State: KS Zip: 67206-

Findings:

- 8 Number of Comments
- 0 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
Quint, Craig		craig.quint@state.co.us	
OBryhim, Reesa		ROBryhim@mulldrilling.com	All Inspections
Beasley, Nolan		nolan.beasley@state.co.us	

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
208227	WELL	IJ	05/01/2023	ERIW	017-07162	NWAU 23 WIW	AC

General Comment:

[SE Compliance Specialist Brian Welsh conducted a Routine UIC Inspection](#)

Location			
Lease Road:			
Type	Access		
comment:	Partially elevated gravel road through farm ground		
Corrective Action:			Date:
Overall Good: <input checked="" type="checkbox"/>			
Signs/Marker:			
Type	WELLHEAD		
Comment:	Lease sign by cathodic rectifier		
Corrective Action:			Date:
Emergency Contact Number:			
Comment:			
Corrective Action:			Date: _____
Overall Good: <input checked="" type="checkbox"/>			
Spills:			
Type	Area	Volume	
In Containment: No			
Comment:			
<input type="checkbox"/> Multiple Spills and Releases?			
Fencing/:			
Type	OTHER		
Comment:	Metal cage around cathodic rectifier		
Corrective Action:			Date:
Type	WELLHEAD		
Comment:	Metal panels around wellhead		
Corrective Action:			Date:
Equipment:			
Type: Ancillary equipment	# 2		corrective date
Comment:	Cathodic rectifier and electric panel		
Corrective Action:			Date:
Venting:			
Yes/No			
Comment:			
Corrective Action:			Date:
Flaring:			
Type			
Comment:			
Corrective Action:			Date:

Inspected Facilities

Facility ID: 208227 Type: WELL API Number: 017-07162 Status: IJ Insp. Status: AC

Underground Injection Control

UIC Violation: _____ Maximum Injection Pressure: _____

UIC Routine

Inj./Tube:	Pressure or inches of Hg <u>-22" Hg</u> (e.g. 30 psig or -30" Hg)	Previous Test Pressure _____	MPP _____
TC:	Pressure or inches of Hg <u>0 PSIG</u>	Previous Test Pressure _____	Inj Zone: <u>MRRW</u>
Brhd:	Pressure or inches of Hg _____	Previous Test Pressure _____	Last MIT: <u>02/09/2022</u>
			AnnMTReq: <u>NO</u>

Comment: CASING HAD LIGHT PUFF, DIED IMMEDIATELY. TBG IJ @ -22" Hg

Corrective Action: _____ Date: _____

Method of Injection: PUMP FEED

Test Type: _____ Tbg psi: _____ Csg psi: _____ BH psi: _____

Insp. Status: _____

Comment: _____

Corrective Action: _____ Date: _____

The subreport 'InspWellFlowline' could not be found at the specified location \\10.14.12

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