



COLORADO OIL & GAS CONSERVATION COMMISSION

NORTHEAST REGION FIELD INSPECTION REPORT

NOTICE OF UNSATISFACTORY INSPECTION
 NOTICE OF SATISFACTORY INSPECTION

337 Cambridge
Brush, CO 80723 970-842-4465



Date: <i>FEB 7, 2001</i>	Facility ID:	Operator: <i>Historical</i>
Location: <i>NESE 11-8N-54W</i>		Lease Name: <i>Rieke 1</i>
API Number: <i>05-075-08424</i>		Inspector: ED BINKLEY Cell: 970-380-2683 <i>[Signature]</i>
INSP TYPE: <i>HR</i>	INSP STATUS: <i>SA</i>	RECLAM <input type="checkbox"/> PASS <input checked="" type="checkbox"/> INTER <input type="checkbox"/>
UIC VIOL TYPE: <input type="checkbox"/> UA <input type="checkbox"/> MI <input type="checkbox"/> OP <input type="checkbox"/> PA <input type="checkbox"/> OT		PASS/FAIL: <input checked="" type="checkbox"/> P <input type="checkbox"/> F
		VIOLATION <input type="checkbox"/> Y <input checked="" type="checkbox"/> N
		NOV <input type="checkbox"/> Y <input checked="" type="checkbox"/> N
		ALL UIC VIOLATIONS REQUIRE NOAVS

Well ID Signs (Rule 210) <input checked="" type="checkbox"/> Y <input checked="" type="checkbox"/> N Comments:	Fences <input checked="" type="checkbox"/> Y <input checked="" type="checkbox"/> N (Rule 603.b.(7), 1002.a) Comments:
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Production Pits (Rule 902, 903, 904) EARTHEN PITS ONLY SENSITIVE AREA <input type="checkbox"/> YES <input type="checkbox"/> NO	<table style="width: 100%;"> <tr> <td>Produced Water Pits</td> <td>Total # _____</td> <td>Oil Accumulation? <input type="checkbox"/> YES <input type="checkbox"/> NO</td> <td><input type="checkbox"/></td> </tr> <tr> <td>Comments:</td> <td colspan="3">_____</td> </tr> <tr> <td>Skimming/Settling Pits</td> <td>Total # _____</td> <td>Covered # _____</td> <td>Uncovered # _____</td> </tr> <tr> <td>Comments:</td> <td colspan="3">_____</td> </tr> <tr> <td>Special Purpose Pits</td> <td>Total # _____</td> <td>Lined # _____</td> <td>Unlined # _____</td> </tr> <tr> <td>Comments:</td> <td colspan="3">_____</td> </tr> </table>	Produced Water Pits	Total # _____	Oil Accumulation? <input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/>	Comments:	_____			Skimming/Settling Pits	Total # _____	Covered # _____	Uncovered # _____	Comments:	_____			Special Purpose Pits	Total # _____	Lined # _____	Unlined # _____	Comments:	_____		
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Special Purpose Pits	Total # _____	Lined # _____	Unlined # _____																						
Comments:	_____																								

Tank Battery Equipment (Rule 604)	<input type="checkbox"/>
BURIED OR PARTIALLY BURIED VESSELS : #STEEL #FIBERGLASS #CONCRETE #OTHER	

Fire Walls/Berms/Dikes [Rule 604.a.(4)]	<input type="checkbox"/>
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General Housekeeping (Rule 603.g)	<input type="checkbox"/>
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Spills (Oil/Water) (Rule 906)	<input type="checkbox"/>
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UIC Routine Inspection FILL OUT FORM 21 WHEN WITNESSING MIT	Inj. Pressure _____ Psig T-C Ann. Pressure _____ Psig	COMMENTS
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Drilling Well/Workover (Rule 317)	<input type="checkbox"/>
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Surface Rehabilitation (Rule 1003, 1004)	<i>well plugged, surface restored.</i> <i>grass</i>	<input type="checkbox"/>
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Miscellaneous	<input type="checkbox"/>
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CORRECTIVE ACTION REQUIRED:

Date Corrective Action Required By: _____ Date Remedied: _____

This report is a Notice of Inspection. The Commission requires that you correct any deficiencies shown on this report in a timely manner. Failure to comply may result in enforcement action by the Commission.

RECEIVED
 FEB 20 01
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