

Location

Overall Good:

Emergency Contact Number:

Comment:

Corrective Action:

Date: _____

Good Housekeeping:

Type OTHER

Comment: All trash, debris, and weeds have been mitigated.

Corrective Action:

Date:

Overall Good:

Spills:

Type	Area	Volume		

In Containment: No

Comment:

Multiple Spills and Releases?

Venting:

Yes/No

Comment:

Corrective Action:

Date:

Flaring:

Type

Comment:

Corrective Action:

Date:

Inspected Facilities

Facility ID: 203373 Type: WELL API Number: 001-08882 Status: PR Insp. Status: PR

Producing Well

Comment: [PR](#)

Corrective Action:

Date: