

**FORM
INSP**

Rev
X/15

**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:

04/12/2017

Submitted Date:

04/12/2017

Document Number:

675103492

FIELD INSPECTION FORM

Loc ID 316089 Inspector Name: GRANAHAN, KYLE 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:

OGCC Operator Number: 56680
Name of Operator: MERRION OIL & GAS CORP
Address: 610 REILLY AVENUE
City: FARMINGTON State: NM Zip: 87401

Findings:

- 9 Number of Comments
- 1 Number of Corrective Actions
- Corrective Action Response Requested

Contact Information:

Contact Name	Phone	Email	Comment
Burger, Craig		craig.burger@state.co.us	
,		dnr_cogccengineering@state.co.us	
Thompson, Philana	505-324-5300	pthompson@merrion.bz	

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
232085	WELL	PR	04/15/2002	GW	103-09756	PARK MOUNTAIN 31-7	SI

General Comment:

Production records indicate well last produced in Aug 2014, no MIT on file.

Location

Overall Good:

Signs/Marker:			
Type	WELLHEAD		
Comment:	Present/complete		
Corrective Action:			Date:
Type	BATTERY		
Comment:	Present/complete		
Corrective Action:			Date:
Type	TANK LABELS/PLACARDS		
Comment:	Present/complete		
Corrective Action:			Date:

Emergency Contact Number:			
Comment:	505-324-5300		
Corrective Action:			Date: _____

Overall Good:

Spills:			
Type	Area	Volume	

In Containment: No

Comment:

Multiple Spills and Releases?

Fencing/:			
Type	WELLHEAD		
Comment:	Satisfactory		
Corrective Action:			Date:
Type	TANK BATTERY		
Comment:	Satisfactory		
Corrective Action:			Date:

Equipment:			corrective date
Type: Gas Meter Run	# 1		
Comment:			
Corrective Action:			Date:
Type: Horizontal Heater Treater	# 1		
Comment:			
Corrective Action:			Date:
Type: Bird Protectors	# 2		
Comment:			
Corrective Action:			Date:
Type: Ancillary equipment	# 2		

Comment: Chemical tote with secondary containment		Date:
Corrective Action:		Date:
Type: Deadman # & Marked	# 4	
Comment:		Date:
Corrective Action:		Date:
Type: Horizontal Heated Separator	# 1	
Comment:		Date:
Corrective Action:		Date:

Tanks and Berms:

Contents	#	Capacity	Type	Tank ID	SE GPS
CONDENSATE	2	400 BBLs	STEEL AST		39.805850,-108.995530
Comment:					
Corrective Action:		Date:			

Paint

Condition	Adequate
Other (Content)	
Other (Capacity)	
Other (Type)	

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Earth	Adequate	Walls Sufficient	Base Sufficient	Adequate
Comment:				
Corrective Action:		Date:		

Venting:

Yes/No	NO
Comment:	
Corrective Action:	
Date:	

Flaring:

Type	
Comment:	
Corrective Action:	
Date:	

Inspected Facilities

Facility ID: 232085 Type: WELL API Number: 103-09756 Status: PR Insp. Status: SI

Idle Well

Purpose: Shut In Temporarily Abandoned Reminder: EQUIPMENT ONSITE

Comment: Well SI at time of inspection , production records indicate well last produced in Aug 2014. No current MIT on record or delinquent as required by Rule 326

Corrective Action: Contact dnr_cogccengineering@state.co.us with resolution plan. Date: 04/22/2017