

**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:

08/03/2017

Submitted Date:

08/03/2017

Document Number:

680302142**FIELD INSPECTION FORM**

Loc ID 314058 Inspector Name: SCHURE, KYM On-Site Inspection ☐ 2A Doc Num: _____

Operator Information:OGCC Operator Number: 66190Name of Operator: OMIMEX PETROLEUM INCAddress: 7950 JOHN T WHITE ROADCity: FORT WORTH State: TX Zip: 76120**Status Summary:**☒ THIS IS A FOLLOW UP INSPECTION☐ FOLLOW UP INSPECTION REQUIRED☐ NO FOLLOW UP INSPECTION REQUIRED**Findings:**7 Number of Comments0 Number of Corrective Actions☐ Corrective Action Response Requested**Contact Information:**

Contact Name	Phone	Email	Comment
Fisher, Jeremy	970-854-4733	Jeremy_Fisher@omimexgroup.com	
Quint, Craig		craig.quint@state.co.us	
Glassey, Joe		joe_glassey@omimexgroup.com	

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
159187	UIC DISPOSAL	AC	11/14/2007		-	MAILANDER SWD 16B-34-6-45	AC
292048	WELL	IJ	04/01/2017	DSPW	095-06149	MAILANDER SWD 16B-34-6-45	AC

General Comment:

UIC/MIT FIR performed. Last UIC/MIT 10/24/212 SATISFACTORY NOTE TO OPERATOR: Please submit Form 21 via COGCC e-form. Form 42 Doc# 401344035 received (date postponed by Schure for scheduling conflicts) Form 21 copy attached

Location

Lease Road:			
Type	Access		
comment:	Satisfactory Located at compressor station		
Corrective Action:		Date:	

Overall Good: ☐

Signs/Marker:			
Type	WELLHEAD		
Comment:	Satisfactory		
Corrective Action:		Date:	

Emergency Contact Number:

Comment: Satisfactory

Corrective Action: _____ Date: _____

Overall Good: ☒

Spills:					
Type	Area	Volume			

In Containment: No

Comment: _____

☐ Multiple Spills and Releases?

Equipment:			corrective date
Type: Other	# 0		
Comment:	No change in equipment inventoried		
Corrective Action:		Date:	

Venting:

Yes/No			
Comment:			
Corrective Action:		Date:	

Flaring:

Type			
Comment:			
Corrective Action:		Date:	

Inspected FacilitiesFacility ID: 159187 Type: UIC API Number: - Status: AC Insp. Status: AC**Underground Injection Control**UIC Violation: _____ Maximum Injection Pressure: 758UIC Routine

Inj./Tube: Pressure or inches of Hg _____ Previous Test Pressure _____ MPP _____
 (e.g. 30 psig or -30" Hg) Inj Zone: _____

TC: Pressure or inches of Hg _____ Previous Test Pressure _____ Last MIT: _____

Brhd: Pressure or inches of Hg _____ Previous Test Pressure _____ AnnMTReq: _____

Comment: _____

Corrective Action: _____ Date: _____

Method of Injection: _____

Test Type: 5 Year Tbg psi: -1 Csg psi: 500 BH psi: _____Insp. Status: Pass

Comment: Casing before start = 0. Casing psi. @ start = 500. Casing psi. @ (5) min. = 500 Casing
 psi. @ (10) min. = 500 Casing psi. @ (15) min. = 500 Loss or Gain = 0
 SATISFACTORYU

Corrective Action: _____ Date: _____

Facility ID: 292048 Type: WELL API Number: 095-06149 Status: IJ Insp. Status: AC

Reclamation - Storm Water - Pit**Storm Water:**

Loc Erosion BMPs	BMP Maintenance	Lease Road Erosion BMPs	Lease BMP Maintenance	Chemical BMPs	Chemical BMP Maintenance	Comment
Other	In Process	Other	In Process			

Comment: [Use stormwater erosion BMP's for runoff management](#)

Corrective Action:

Date: _____

Pits: ☐ NO SURFACE INDICATION OF PIT**Attached Documents**You can go to COGCC Images (<https://cogcc.state.co.us/weblink/>) and search by document number:

Document Num	Description	URL
401364673	INSPECTION SUBMITTED	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4216237
680302187	Form 21	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4216234