



COLORADO OIL & GAS CONSERVATION COMMISSION

NORTHEAST REGION FIELD INSPECTION REPORT



<input type="checkbox"/> NOTICE OF UNSATISFACTORY INSPECTION <input checked="" type="checkbox"/> NOTICE OF SATISFACTORY INSPECTION	337 Cambridge Brush, CO 80723 970-842-4465
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Date: <i>1-25-01</i>	Facility ID:	Operator: <i>HISTORICAL</i>
Location: <i>SE NW 35-8N-53W</i>		Lease Name: <i>GAINES - 1</i>
API Number: <i>05-075-05547</i>		Inspector: ED BINKLEY Cell: 970-380-2683

INSP TYPE <input checked="" type="checkbox"/>	INSP STATUS <input checked="" type="checkbox"/>	RECLAM <input type="checkbox"/> PASS <input checked="" type="checkbox"/> INTER <input type="checkbox"/>	PASS/FAIL <input checked="" type="checkbox"/> F <input type="checkbox"/>	VIOLATION <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	NOV <input type="checkbox"/> Y <input checked="" type="checkbox"/> N
UIC VIOL TYPE: <input type="checkbox"/> UA <input type="checkbox"/> MI <input type="checkbox"/> OP <input type="checkbox"/> PA <input type="checkbox"/> OT			TBG/PKR LK <input type="checkbox"/>	CSG LK <input type="checkbox"/>	ALL UIC VIOLATIONS REQUIRE NOTICES

Well ID Signs (Rule 210) Y <input checked="" type="checkbox"/> N <input type="checkbox"/> Comments:	Fences Y <input type="checkbox"/> N <input checked="" type="checkbox"/> (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	Produced Water Pits Total # _____ Oil Accumulation? <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> Comments: _____ Slidming/Settling Pits Total # _____ Covered # _____ Uncovered # _____ Comments: _____ Special Purpose Pits Total # _____ Lined # _____ Unlined # _____ Comments: _____
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Tank Battery Equipment (Rule 604)	<input type="checkbox"/> BURIED OR PARTIALLY BURIED VESSELS: #STEEL _____ #FIBERGLASS _____ #CONCRETE _____ #OTHER _____
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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 _____ Pa/g T-C Ann. Pressure _____ Pa/g	COMMENTS <div style="text-align: center; font-size: small;"> RECEIVED FEB 20 01 COGCC </div>
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Drilling Well/Workover (Rule 317)	<input type="checkbox"/>
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Surface Rehabilitation (Rule 1003, 1004)	<i>SURFACE RESTORED</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.