

**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:

12/04/2018

Submitted Date:

12/04/2018

Document Number:

680304253**FIELD INSPECTION FORM**
 Loc ID 424683 Inspector Name: SCHURE, KYM On-Site Inspection ☐ 2A Doc Num:
**Operator Information:**OGCC Operator Number: 10704Name of Operator: FORTIGEN RESOURCES LLCAddress: 1165 DELAWARE STREET #160City: DENVER State: CO Zip: 80204**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**ANY CORRECTIVE ACTION(S) FROM  
PREVIOUS INSPECTIONS THAT HAVE NOT  
BEEN ADDRESSED ARE STILL APPLICABLE****Contact Information:**

Contact Name	Phone	Email	Comment
Lueth, Broc		blueth@fortigen.net	
,	(402)997-7537	wf.hayworth@gmail.com	

**Inspected Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
424644	WELL	PR	02/01/2012	GW	095-06328	SCHLACHTER 743-6-11	SI

**General Comment:**

Follow-up FIR Doc#680001364 - CA's have been performed. SATISFACTORY - Operator is in process of replacing production equipment with intention of returning to production.

**Location**

<b>Lease Road:</b>			
Type	Access		
comment:	Ag. land trail		
Corrective Action	L	Date:	

Overall Good: ☐

<b>Signs/Marker:</b>			
Type	WELLHEAD		
Comment:	Satisfactory		
Corrective Action:		Date:	

Emergency Contact Number:

Comment: Satisfactory

Corrective Action: \_\_\_\_\_ Date: \_\_\_\_\_

Overall Good: ☒

<b>Spills:</b>					
Type	Area	Volume			

In Containment: No

Comment: \_\_\_\_\_

☐ Multiple Spills and Releases?

<b>Equipment:</b>			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 Facilities									
Facility ID:	424644	Type:	WELL	API Number:	095-06328	Status:	PR	Insp. Status:	SI
Idle Well									
Purpose: <input checked="" type="checkbox"/> Shut In <input type="checkbox"/> Temporarily Abandoned      Reminder: _____									
Comment: <input type="text" value="Change of Operator"/>									
Corrective Action: <input type="text"/> Date: _____									

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 BMP's for erosion management

Corrective Action:

Date:

Pits: ☐ NO SURFACE INDICATION OF PIT