

**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:

01/30/2019

Submitted Date:

01/30/2019

Document Number:

680304576**FIELD INSPECTION FORM**

Loc ID 314093 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
,	(303) 748-3732 (402) 997-7537	wf.hayworth@gmail.com	

**Inspected Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
149	WELL	SI	04/01/2018	GW	095-06184	OLTJENBRUNS STATE 944-36-34	SI

**General Comment:**

[Follow-up FIR Doc#680001535 - CA's have been performed - SATISFACTORY](#)

**Location**

<b>Lease Road:</b>			
Type	Access		
comment:	AG land		
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		
Corrective Action:		Date:	

**Venting:**

Yes/No			
Comment:			
Corrective Action:		Date:	

**Flaring:**

Type			
Comment:			
Corrective Action:		Date:	

Inspected Facilities									
Facility ID:	149	Type:	WELL	API Number:	095-06184	Status:	SI	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
Gravel	In Process	Other	In Process			

Comment:

Corrective Action:

Date:

Pits: ☐ NO SURFACE INDICATION OF PIT