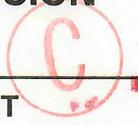




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COLORADO OIL & GAS CONSERVATION COMMISSION
NORTHEAST REGION INSPECTION REPORT



<input checked="" type="checkbox"/> NOTICE OF UNSATISFACTORY INSPECTION		337 CAMBRIDGE STREET	
<input type="checkbox"/> NOTICE OF SATISFACTORY INSPECTION		BRUSH, CO 80723 (970)-842-4465	
API No. 05- <u>075 - 06354</u>		LEASE NAME: <u>Green A-18</u>	
LOCATION: <u>NESE 30-9N-53W</u>		OPERATOR: <u>Shell / Marathon</u>	
DATE: <u>11-12-98</u>		INSPECTOR: ED BINKLEY MOBIL (970)-380-2683	
INSP TYPE <u>HR</u>	INSP STATUS <u>DA</u>	PA Y <input type="checkbox"/> N <input checked="" type="checkbox"/>	PASS/FAIL P <input type="checkbox"/> F <input checked="" type="checkbox"/>
VIOLATION <input checked="" type="checkbox"/> Y <input type="checkbox"/> N		NOV <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
UIC VIOL TYPE	UA <input type="checkbox"/> MI <input type="checkbox"/> OP <input type="checkbox"/> PA <input type="checkbox"/> OT <input type="checkbox"/>	TBG/PKR LK <input type="checkbox"/>	CSG LK <input type="checkbox"/>
<small>ALL UIC VIOLATIONS REQUIRE NOAVS</small>			
Well ID Signs (Rule 210)	<input type="checkbox"/>		Fences (Rule 604.C.(3), 1003.A)
Production Pits (Rule 902, 903, 904) EARTHEN PITS ONLY	PRODUCED WATER PITS TOTAL # _____	OIL ACCUMULATION <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/>	SKIMMING/SETTLING PITS TOTAL # _____
	SPECIAL PURPOSE PITS TOTAL # _____	COVERED # _____ UNCOVERED # _____	
	COMMENTS/SIZE _____	LINED # _____ UNLINED # _____	
SENSITIVE AREA <input type="checkbox"/> YES <input type="checkbox"/> NO			
Tank Battery Equipment (Rule 604)	<input type="checkbox"/>		
	BURIED OR PARTIALLY BURIED VESSELS : #STEEL #FIBERGLASS #CONCRETE #OTHER		
Fire Walls/Berms/Dikes (Rule 604)	<input type="checkbox"/>		
General Housekeeping (Rule 603.G)	<input type="checkbox"/>		
Spills (Oil/Water) (Rule 908)	<input type="checkbox"/>		
UIC ROUTINE INSPECTION FILL OUT FORM 21 WHEN WITNESSING MIT	INJ PRESSURE _____ PSIG	T-C ANN PRESSURE _____ PSIG	COMMENTS <div style="text-align: center;"> 00238802</div>
	BRHD PRESSURE _____ PSIG		
Drilling Well/Workover (Rule 315)	<input type="checkbox"/>		
Surface Rehabilitation (Rule 317)	<u>Reinspection of this site found deadman anchors, flowing risers and caved in</u> <input checked="" type="checkbox"/>		
Miscellaneous	<u>rathole. location is grass covered.</u> <input type="checkbox"/>		
CORRECTIVE ACTION REQUIRED: <u>Fill cave-in, remove deadman anchors and risers; submit Form 104 when work is done.</u>			
Date Corrective Action Required By: <u>12-30-98</u>		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.