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OIL & GAS CONSERVATION COMMISSION  
THEAST REGION INSPECTION REPORT



RECEIVED  
NOV 30 1998

<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 - 06286</u>		LEASE NAME: <u>Green A-17</u>	
LOCATION: <u>NWSE 30-9N-53W</u>		OPERATOR: <u>Shell / Monahan</u>	
DATE: <u>11-12-98</u>		INSPECTOR: <b>ED BINKLEY</b> MOBIL (970)-380-2683	
INSP TYPE <u>SR</u>	INSP STATUS <u>PA</u>	PA <input checked="" type="checkbox"/> Y <input checked="" type="checkbox"/> N	PASS/FAIL <input checked="" type="checkbox"/> F <input type="checkbox"/> VIOLATION Y <input checked="" 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"/> ALL UIC VIOLATIONS REQUIRE MOAVS
<b>Well ID Signs</b> (Rule 210)	<input type="checkbox"/>	<b>Fences</b>	<input type="checkbox"/>
<b>Production Pits</b> (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 # _____	COVERED # _____ UNCOVERED # _____	
	SPECIAL PURPOSE PITS TOTAL # _____	LINED # _____ UNLINED # _____	
	COMMENTS/SIZE _____		
SENSITIVE AREA <input type="checkbox"/> YES <input type="checkbox"/> NO			
<b>Tank Battery Equipment</b> (Rule 604)	BURIED OR PARTIALLY BURIED VESSELS : #STEEL #FIBERGLASS #CONCRETE #OTHER <input type="checkbox"/>		
<b>Fire Walls/Berms/Dikes</b> (Rule 604)	<input type="checkbox"/>		
<b>General Housekeeping</b> (Rule 603.G)	<input type="checkbox"/>		
<b>Spills (Oil/Water)</b> (Rule 908)	<input type="checkbox"/>		
<b>UIC ROUTINE INSPECTION</b> FILL OUT FORM 21 WHEN WITNESSING MIT	INJ PRESSURE _____ PSIG	COMMENTS	
	T-C ANN PRESSURE _____ PSIG		
	BRHD PRESSURE _____ PSIG		
<b>Drilling Well/Workover</b> (Rule 315)	<input type="checkbox"/>		
<b>Surface Rehabilitation</b> (Rule 317)	<u>Site plowed and reseeded.</u> <input type="checkbox"/>		
<b>Miscellaneous</b>	<u>(Cement base removed.)</u> <input type="checkbox"/>		
<b>CORRECTIVE ACTION REQUIRED:</b>			
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.