

FORM  
INSPRev  
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:

03/03/2020

Submitted Date:

03/04/2020

Document Number:

688307125

### FIELD INSPECTION FORM

Loc ID 316962 Inspector Name: Sherman, Susan On-Site Inspection  2A Doc Num: \_\_\_\_\_

**Operator Information:**

OGCC Operator Number: 94300  
Name of Operator: WARD & SON\* ALFRED  
Address: P O BOX 737  
City: OGALLALLA State: NE Zip: 69153

**Status Summary:**

- THIS IS A FOLLOW UP INSPECTION  
 FOLLOW UP INSPECTION REQUIRED  
 NO FOLLOW UP INSPECTION REQUIRED

**Findings:**

3 Number of Comments  
0 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
Ward, Randy	(308) 280-0100	randy@wardoil.com	

**Inspected Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
150015	UIC DISPOSAL	AC	01/07/1971		-	STATE B-6	SI

**General Comment:**

Routine Inspection, UIC well not disposing

**Location**

Overall Good:

**Signs/Marker:**

	Type WELLHEAD		
Comment:			
Corrective Action:		Date:	

Emergency Contact Number:

Comment:	308-280-0100		
Corrective Action:		Date:	_____

Overall Good:

**Spills:**

Type	Area	Volume		

In Containment: No

Comment:

Multiple Spills and Releases?

**Venting:**

Yes/No			
Comment:			
Corrective Action:		Date:	

**Flaring:**

Type			
Comment:			
Corrective Action:		Date:	

**Location Construction**

Location ID: 233533 CDP: \_\_\_\_\_

Comment:

Corrective Action:

Date: \_\_\_\_\_

**Form 2A COAs:**

**Comment:** No COAs.

Corrective Action:

Date: \_\_\_\_\_

**Wildlife BMPs:**

**Comment:**

Corrective Action:

Date: \_\_\_\_\_

**Comment:**

**Corrective Action:**

Date: \_\_\_\_\_

**On Site Inspection (305):**

Surface Owner Contact Information:

Name: \_\_\_\_\_ Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Operator Rep. Contact Information:

Landman Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Date Onsite Request Received: \_\_\_\_\_ Date of Rule 306 Consultation: \_\_\_\_\_

Request LGD Attendance: \_\_\_\_\_

LGD Contact Information:

Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_ Agreed to Attend: \_\_\_\_\_

Summary of Landowner Issues:

Summary of Operator Response to Landowner Issues:

Onsite Inspection Memorandum Summarizing Discussions at Inspection as Attachment:

**Inspected Facilities**

Facility ID: 150015 Type: UIC API Number: - Status: AC Insp. Status: SI

**Underground Injection Control**

UIC Violation: \_\_\_\_\_ Maximum Injection Pressure: \_\_\_\_\_

UIC Routine

Inj./Tube: Pressure or inches of Hg 0 Previous Test Pressure \_\_\_\_\_ MPP \_\_\_\_\_  
 (e.g. 30 psig or -30" Hg) Inj Zone: \_\_\_\_\_  
 TC: Pressure or inches of Hg 0 Previous Test Pressure \_\_\_\_\_ Last MIT: \_\_\_\_\_  
 Brhd: Pressure or inches of Hg \_\_\_\_\_ Previous Test Pressure \_\_\_\_\_ AnnMTReq: \_\_\_\_\_

Comment:

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

Method of Injection: \_\_\_\_\_

Test Type: \_\_\_\_\_ Tbg psi: \_\_\_\_\_ Csg psi: \_\_\_\_\_ BH psi: \_\_\_\_\_

Insp. Status: \_\_\_\_\_

Comment:

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

**Attached Documents**

You can go to COGCC Images (<https://cogcc.state.co.us/weblink/>) and search by document number:

Document Num	Description	URL
688307154	Ward & Son Alfred, State B-6-WD sign	<a href="http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=5085916">http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=5085916</a>
688307155	Ward & Son Alfred, State B-6-WD wellhead	<a href="http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=5085917">http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=5085917</a>