

**FORM
INSP**Rev
X/20**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:

04/21/2021

Submitted Date:

04/25/2021

Document Number:

699602386

FIELD INSPECTION FORMLoc ID 313972 Inspector Name: SCHURE, KYM On-Site Inspection ☐ 2A Doc Num: _____**Operator Information:**

OGCC Operator Number: 10657

Name of Operator: PCR OPERATING LLC

Address: 4040 BROADWAY STREET #510

City: SAN ANTONIO State: TX Zip: 78209

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
Hataway, Billy		bhataway@passcreekresources.com	
Quint, Craig		craig.quint@state.co.us	
,		gwehrer1961@outlook.com	

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
227405	WELL	TA	04/19/1990	ERIW	087-60008	ADENA J SAND UNIT W-21	TA

General Comment:

UIC-MIT 2021 SATISFACTORY

LocationOverall Good: ☐

Emergency Contact Number:

Comment: 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:

Inspected FacilitiesFacility ID: 227405 Type: WELL API Number: 087-60008 Status: TA Insp. Status: TA**Underground Injection Control**

UIC Violation: _____ Maximum Injection Pressure: _____

UIC Routine

Inj./Tube: Pressure or inches of Hg _____ Previous Test Pressure _____ MPP _____
 (e.g. 30 psig or -30" Hg) Inj Zone: JSND

TC: Pressure or inches of Hg _____ Previous Test Pressure _____ Last MIT: 07/11/2016

Brhd: Pressure or inches of Hg _____ Previous Test Pressure _____ AnnMTReq: _____

Comment: _____

Corrective Action: _____ Date: _____

Method of Injection: _____

Test Type: 5 Year Tbg psi: 0 Csg psi: 325 BH psi: _____Insp. Status: PassComment: Form 21 attached

Corrective Action: _____ Date: _____

COGCC Comments

Comment	User	Date
<u>UIC-MIT 2021 SATISFACTORY</u>	<u>schureky</u>	<u>04/25/2021</u>

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

Document Num	Description	URL
<u>699602387</u>	<u>Form 21</u>	<u>http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=5412103</u>