



COLORADO OIL & GAS CONSERVATION COMMISSION

NORTHEAST REGION FIELD INSPECTION REPORT

<input type="checkbox"/> NOTICE OF UNSATISFACTORY INSPECTION		337 Cambridge	
<input checked="" type="checkbox"/> NOTICE OF SATISFACTORY INSPECTION		Brush, CO 80723 970-842-4465	
Date: <i>10-4-01</i>	Facility ID:	Operator: <i>Falcon Seaboard Historical</i>	
Location: <i>NESE 25-12N-55W</i>		Lease Name: <i>Clearman-UPRR</i>	
API Number: <i>05-075-07265</i>		Inspector: ED BINKLEY Cell: 970-380-2683	
INSP TYPE <i>HR</i>	INSP STATUS <i>DA</i>	PA <input type="checkbox"/> Y <input type="checkbox"/> N	PASS/FAIL <input checked="" type="checkbox"/> P <input type="checkbox"/> F
		VIOLATION <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	NOV <input type="checkbox"/> 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"/> <small>ALL UIC VIOLATIONS REQUIRE NOAVS</small>
Well ID Signs (Rule 210) <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Comments:	Fences <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	Comments:
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"/> Comments: _____	Skimming/Settling Pits Total # _____ Covered # _____ Uncovered # _____ Comments: _____	
SENSITIVE AREA <input type="checkbox"/> YES <input type="checkbox"/> NO	Special Purpose Pits Total # _____ Lined # _____ Unlined # _____ Comments: _____		
Tank Battery Equipment (Rule 604)	BURIED OR PARTIALLY BURIED VESSELS : #STEEL _____ #FIBERGLASS _____ #CONCRETE _____ #OTHER _____		
Fire Walls/Berms/Dikes [Rule 604.a.(4)]			
General Housekeeping (Rule 603.g)			
Spills (Oil/Water) (Rule 906)			
UIC Routine Inspection FILL OUT FORM 21 WHEN WITNESSING MIT	Inj. Pressure _____ Psig T-C Ann. Pressure _____ Psig	COMMENTS <i>COGCC OCT 11 01 RECEIVED</i>	
Drilling Well/Workover (Rule 317)			
Surface Rehabilitation (Rule 1003, 1004)	<i>cultivated</i>		
Miscellaneous			
CORRECTIVE ACTION REQUIRED:			
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.