

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:

08/10/2020

Submitted Date:

08/13/2020

Document Number:

688308341

**FIELD INSPECTION FORM**

Loc ID \_\_\_\_\_ Inspector Name: \_\_\_\_\_ On-Site Inspection   
316967 \_\_\_\_\_ Sherman, Susan \_\_\_\_\_ 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:**

6 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
233585	WELL	PR	08/01/2019	OW	121-05637	PIERCE 3	PR

**General Comment:**

Reinspection/High Risk Inspection, passed

**Location**

Overall Good:

**Signs/Marker:**

Type	CONTAINERS		
Comment:			
Corrective Action:		Date:	
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?

**Fencing/:**

Type	WELLHEAD		
Comment:	pasture		
Corrective Action:		Date:	

**Equipment:**

Type	#	comment	corrective date
Prime Mover	# 1	electric	
Corrective Action:			Date:
Pump Jack	# 2		
Comment:			
Corrective Action:			Date:
Bradenhead	# 1		
Comment:			
Corrective Action:			Date:
Deadman # & Marked	# 4		
Comment:			
Corrective Action:			Date:

**Tanks and Berms:**

Contents	#	Capacity	Type	Tank ID	SE GPS
			CENTRALIZED BATTERY		
Comment:					

Corrective Action:	Date:
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**Paint**

Condition			
Other (Content)			
Other (Capacity)			
Other (Type)			

**Berms**

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Comment:				
Corrective Action:				Date:

**Venting:**

Yes/No	NO		
Comment:			
Corrective Action:			Date:

**Flaring:**

Type			
Comment:			
Corrective Action:			Date:

**Location Construction**

Location ID: 233585 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: 233585 Type: WELL API Number: 121-05637 Status: PR Insp. Status: PR

**Producing Well**

Comment: [PR. 6/1/2020 production reported to COGCC database.](#)

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
688308370	Ward & Son Pierce 3 REIN	<a href="http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=5223666">http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=5223666</a>