

**FORM
INSP**

Rev
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:
12/15/2016
Submitted Date:
12/15/2016
Document Number:
673403941

FIELD INSPECTION FORM

Loc ID 312792 Inspector Name: Waldron, Emily On-Site Inspection 2A Doc Num: _____

Status Summary:

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

Operator Information:

OGCC Operator Number: 95960
Name of Operator: WEXPRO COMPANY
Address: P O BOX 45003
City: SALT LAKE CITY State: UT Zip: 84145-

Findings:

2 Number of Comments
0 Number of Corrective Actions
 Corrective Action Response Requested

Contact Information:

Contact Name	Phone	Email	Comment
Fredrickson, Tammy	307-352-7566	Tammy.Fredrickson@questar.com	

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
222447	WELL	PR	08/06/2003	GW	081-05453	MUSSER, B W "A" 1	PR

General Comment:

(This area is intentionally left blank for general comments.)

Location

Overall Good:

Signs/Marker:

Type	BATTERY		
Comment:			
Corrective Action:		Date:	
Type	CONTAINERS		
Comment:			
Corrective Action:		Date:	
Type	WELLHEAD		
Comment:			
Corrective Action:		Date:	

Emergency Contact Number:

Comment: 1-800-341-3129

Corrective Action:

Date: _____

Overall Good:

Spills:

Type	Area	Volume		

In Containment: No

Comment:

Multiple Spills and Releases?

Equipment:

Type	#		corrective date
Type: Bird Protectors	#		
Comment:			
Corrective Action:		Date:	
Type: Horizontal Heated Separator	# 1		
Comment:			
Corrective Action:		Date:	
Type: Gas Meter Run	# 1		
Comment:			
Corrective Action:		Date:	

Tanks and Berms:

Contents	#	Capacity	Type	Tank ID	SE GPS
GLYCOL	1		HEATED STEEL AST		40.946400,-108.311680
Comment:					
Corrective Action:				Date:	

Paint

Condition	
Other (Content)	

Other (Capacity)	
Other (Type)	

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Comment:				
Corrective Action:				Date: <input style="width:100px;" type="text"/>

Venting:

Yes/No	NO		
Comment:			
Corrective Action:			Date: <input style="width:100px;" type="text"/>

Flaring:

Type		
Comment:		
Corrective Action:		Date: <input style="width:100px;" type="text"/>

Inspected Facilities

Facility ID: 222447 Type: WELL API Number: 081-05453 Status: PR Insp. Status: PR

Producing Well

Comment:

Corrective Action:

Date:

Reclamation - Storm Water - Pit

Storm Water:

Loc Erosion BMPs	BMP Maintenance	Lease Road Erosion BMPs	Lease BMP Maintenance	Chemical BMPs	Chemical BMP Maintenance	Comment

Comment:

Corrective Action:

Date: _____

Pits: NO SURFACE INDICATION OF PIT