

**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:

07/10/2017

Submitted Date:

07/11/2017

Document Number:

680302134

**FIELD INSPECTION FORM**

Loc ID: 312347 Inspector Name: SCHURE, KYM 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: 10322  
Name of Operator: EAST CHEYENNE GAS STORAGE LLC  
Address: 10370 RICHMOND AVE SUITE 510  
City: HOUSTON State: TX Zip: 77042

**Findings:**

- 8 Number of Comments
- 0 Number of Corrective Actions
- Corrective Action Response Requested

**Contact Information:**

Contact Name	Phone	Email	Comment
Francis, Greg	(720) 351-4006	gfrancis@mehllc.com	
Quint, Craig		craig.quint@state.co.us	

**Inspected Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
221223	WELL	IJ	02/03/2010	ERIW	075-60034	UPRR WI-2	IJ

**General Comment:**

[UIC Routine Inspection](#)

**Location**

<b>Lease Road:</b>			
Type	Access		
comment:	Satisfactory		
Corrective Action:			Date:

Overall Good:

<b>Signs/Marker:</b>			
Type	WELLHEAD		
Comment:	Satisfactory		
Corrective Action:			Date:

<b>Emergency Contact Number:</b>			
Comment:	Satisfactory		
Corrective Action:			Date: _____

Overall Good:

<b>Spills:</b>			
Type	Area	Volume	

In Containment: No

Comment:

Multiple Spills and Releases?

<b>Fencing/:</b>			
Type	WELLHEAD		
Comment:	Satisfactory		
Corrective Action:			Date:

<b>Equipment:</b>			
Type: Other	# 0		corrective date
Comment:	No change in equipment inventoried		
Corrective Action:			Date:

<b>Venting:</b>			
Yes/No			
Comment:			
Corrective Action:			Date:

<b>Flaring:</b>			
Type			
Comment:			
Corrective Action:			Date:

**Inspected Facilities**

Facility ID: 221223 Type: WELL API Number: 075-60034 Status: IJ Insp. Status: IJ

**Underground Injection Control**

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

UIC Routine

Inj./Tube:	Pressure or inches of Hg <u>-1</u> (e.g. 30 psig or -30" Hg)	Previous Test Pressure _____	MPP _____
TC:	Pressure or inches of Hg <u>0</u>	Previous Test Pressure _____	Inj Zone: <u>JSND</u>
Brhd:	Pressure or inches of Hg _____	Previous Test Pressure _____	Last MIT: <u>07/30/2013</u>
			AnnMTReq: _____

Comment: Tubing on vacuum Casing = 0 psi. No problems found

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

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

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

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

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
Gravel	In Process	Other	In Process			

Comment: [Continue BMP's for stormwater erosion management](#)

Corrective Action:

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

**Pits:**  NO SURFACE INDICATION OF PIT