

**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:

12/05/2017

Submitted Date:

12/06/2017

Document Number:

689800641

FIELD INSPECTION FORM

Loc ID 313368 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:

5 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 |
|-------------|------|--------|-------------|------------|-----------|---------------|-------------|
| 293069 | WELL | PR | 06/05/2008 | GW | 081-07406 | B W MUSSER 27 | PR |

General Comment:

[Routine FIU inspection.](#)

Location

Overall Good:

| Signs/Marker: | | | |
|----------------------|----------------------|-------|--|
| Type | CONTAINERS | | |
| Comment: | | | |
| Corrective Action: | | Date: | |
| Type | WELLHEAD | | |
| Comment: | | | |
| Corrective Action: | | Date: | |
| Type | TANK LABELS/PLACARDS | | |
| Comment: | | | |
| Corrective Action: | | Date: | |
| Type | BATTERY | | |
| 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: | | | corrective date |
|---------------------------------|----------------------|-------|-----------------|
| Type: Bird Protectors | # | | |
| Comment: | | | |
| Corrective Action: | | Date: | |
| Type: Horizontal Heater Treater | # 1 | | |
| Comment: | 40.94505, -108.29531 | | |
| Corrective Action: | | Date: | |
| Type: Gas Meter Run | # 1 | | |
| Comment: | 40.94505, -108.29531 | | |
| Corrective Action: | | Date: | |
| Type: Deadman # & Marked | # 4 | | |
| Comment: | | | |
| Corrective Action: | | Date: | |

Tanks and Berms:

| Contents | # | Capacity | Type | Tank ID | SE GPS |
|----------|---|----------|------|---------|--------|
| | | | | | |

| | | | | | |
|--------------------|----------|---------------------|---------------------|-------------|-----------------------|
| CONDENSATE | 2 | 400 BBLs | HEATED STEEL AST | | 40.944830,-108.295700 |
| Comment: | | | | | |
| Corrective Action: | | | | | Date: |
| Paint | | | | | |
| Condition | Adequate | | | | |
| Other (Content) | | | | | |
| Other (Capacity) | | | | | |
| Other (Type) | | | | | |
| Berms | | | | | |
| Type | Capacity | Permeability (Wall) | Permeability (Base) | Maintenance | |
| Metal | Adequate | | | Adequate | |
| Comment: | | | | | |
| Corrective Action: | | | | | Date: |
| Venting: | | | | | |
| Yes/No | NO | | | | |
| Comment: | | | | | |
| Corrective Action: | | | | | Date: |
| Flaring: | | | | | |
| Type | | | | | |
| Comment: | | | | | |
| Corrective Action: | | | | | Date: |

Inspected Facilities

Facility ID: 293069 Type: WELL API Number: 081-07406 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: No apparent soil migration; erosion or soil movement.

Corrective Action:

Date: _____

Pits: NO SURFACE INDICATION OF PIT

Attached Documents

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

| Document Num | Description | URL |
|--------------|------------------|---|
| 689800642 | Inspection Photo | http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4319012 |