

**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:

01/12/2018

Submitted Date:

01/12/2018

Document Number:

677400352**FIELD INSPECTION FORM**Loc ID 319759 Inspector Name: MONTOYA, JOHN On-Site Inspection ☐ 2A Doc Num: \_\_\_\_\_**Operator Information:**OGCC Operator Number: 95620Name of Operator: WESTERN OPERATING COMPANYAddress: 1165 DELAWARE STREET #200City: DENVER State: CO Zip: 80204**Status Summary:**

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

**Findings:**4 Number of Comments0 Number of Corrective Actions☐ Corrective Action Response Requested**Contact Information:**

| Contact Name  | Phone          | Email                      | Comment                         |
|---------------|----------------|----------------------------|---------------------------------|
| Koehler, Bob  |                | bob.koehler@state.co.us    |                                 |
| James, Steven | (303) 893-2438 | steve@westernoperating.com | <a href="#">All Inspections</a> |

**Inspected Facilities:**

| Facility ID | Type         | Status | Status Date | Well Class | API Num | Facility Name       | Insp Status |
|-------------|--------------|--------|-------------|------------|---------|---------------------|-------------|
| 150247      | UIC DISPOSAL | AC     | 07/05/1989  |            | -       | DOWNING, RALPH 24-1 | SI          |

**General Comment:**

**Location****Lease Road:**

|                   |        |       |  |
|-------------------|--------|-------|--|
| Type              | Access |       |  |
| comment:          |        |       |  |
| Corrective Action | L      | Date: |  |

Overall Good: ☒**Signs/Marker:**

|                    |          |       |  |
|--------------------|----------|-------|--|
| Type               | WELLHEAD |       |  |
| Comment:           |          |       |  |
| Corrective Action: |          | Date: |  |

**Emergency Contact Number:**

|                    |    |       |  |
|--------------------|----|-------|--|
| Comment:           | ok |       |  |
| Corrective Action: |    | Date: |  |

Overall Good: ☒**Spills:**

|      |      |        |  |  |
|------|------|--------|--|--|
| Type | Area | Volume |  |  |
|------|------|--------|--|--|

In Containment: No

Comment:

☐ Multiple Spills and Releases?**Equipment:**

|                          |     |       |                 |
|--------------------------|-----|-------|-----------------|
|                          |     |       | corrective date |
| Type: Deadman # & Marked | # 4 |       |                 |
| Comment:                 |     |       |                 |
| Corrective Action:       |     | Date: |                 |

**Venting:**

|                    |    |       |  |
|--------------------|----|-------|--|
| Yes/No             | NO |       |  |
| Comment:           |    |       |  |
| Corrective Action: |    | Date: |  |

**Flaring:**

|                    |  |       |
|--------------------|--|-------|
| Type               |  |       |
| Comment:           |  |       |
| Corrective Action: |  | Date: |

**Inspected Facilities**Facility ID: 150247 Type: UIC API Number: - Status: AC Insp. Status: SI**Underground Injection Control**

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

UIC Routine

Inj./Tube: Pressure or inches of Hg 2 psi Previous Test Pressure \_\_\_\_\_ MPP \_\_\_\_\_  
 (e.g. 30 psig or -30" Hg) Inj Zone: \_\_\_\_\_

TC: Pressure or inches of Hg 0 Previous Test Pressure \_\_\_\_\_ Last MIT: \_\_\_\_\_

Brhd: Pressure or inches of Hg 0 Previous Test Pressure \_\_\_\_\_ AnnMTReq: \_\_\_\_\_

Comment: uic inspection

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

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

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

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

Comment: \_\_\_\_\_

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

**Idle Well**Purpose: ☒ Shut In ☐ Temporarily Abandoned Reminder: \_\_\_\_\_

Comment: \_\_\_\_\_

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

**COGCC Comments**

| Comment                       | User     | Date       |
|-------------------------------|----------|------------|
| <u>UIC Inspection well SI</u> | montoyaj | 01/12/2018 |

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

| Document Num | Description | URL   |
|--------------|-------------|---|
| 677400353    | well sign   | <a href="http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4349767">http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4349767</a> |