

**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:

02/20/2018

Submitted Date:

02/21/2018

Document Number:

689500598**FIELD INSPECTION FORM**

Loc ID 311790	Inspector Name: GRANAHAN, KYLE	On-Site Inspection <input type="checkbox"/>	Status Summary: <input type="checkbox"/> THIS IS A FOLLOW UP INSPECTION <input type="checkbox"/> FOLLOW UP INSPECTION REQUIRED <input checked="" type="checkbox"/> NO FOLLOW UP INSPECTION REQUIRED															
2A Doc Num: _____			Findings: 5 Number of Comments 0 Number of Corrective Actions <input type="checkbox"/> Corrective Action Response Requested															
Operator Information: OGCC Operator Number: <u>16700</u> Name of Operator: <u>CHEVRON USA INC</u> Address: <u>6301 DEAUVILLE BLVD</u> City: <u>MIDLAND</u> State: <u>TX</u> Zip: <u>79706</u>																		
Contact Information: <table border="1" style="width:100%"> <tr> <th>Contact Name</th> <th>Phone</th> <th>Email</th> <th>Comment</th> </tr> <tr> <td>Peterson, Diane</td> <td>970-675-3842</td> <td>dlpe@chevron.com</td> <td></td> </tr> </table>				Contact Name	Phone	Email	Comment	Peterson, Diane	970-675-3842	dlpe@chevron.com								
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Peterson, Diane	970-675-3842	dlpe@chevron.com																
Inspected Facilities: <table border="1" style="width:100%"> <tr> <th>Facility ID</th> <th>Type</th> <th>Status</th> <th>Status Date</th> <th>Well Class</th> <th>API Num</th> <th>Facility Name</th> <th>Insp Status</th> </tr> <tr> <td>228589</td> <td>WELL</td> <td>TA</td> <td>04/27/2017</td> <td>ERIW</td> <td>103-05487</td> <td>UNION PACIFIC 29-32</td> <td>TA</td> </tr> </table>			Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status	228589	WELL	TA	04/27/2017	ERIW	103-05487	UNION PACIFIC 29-32	TA
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228589	WELL	TA	04/27/2017	ERIW	103-05487	UNION PACIFIC 29-32	TA											
General Comment: On location in regards to form 42 doc# 401539587 to witness MIT Top of packer at 5599' Top of open hole at 5654' 55' between packer and open hole No casing or tubing pressure before or after test Casing start psi 350 Casing 5 min psi 350 Casing 10 min psi 350 Casing final psi 350 0 psi change during test																		

LocationOverall Good: ☒

Signs/Marker:			
Type	WELLHEAD		
Comment:	Present/complete		
Corrective Action:		Date:	

Emergency Contact Number:

Comment: 970-675-3700

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:	228589	Type:	WELL	API Number:	103-05487	Status:	TA	Insp. Status:	TA	
Workover										
Comment:	<div>On location in regards to form 42 doc# 401539587 to witness MIT Top of packer at 5599' Top of open hole at 5654' 55' between packer and open hole No casing or tubing pressure before or after test Casing start psi 350 Casing 5 min psi 350 Casing 10 min psi 350 Casing final psi 350 0 psi change during test</div>									
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
Compaction	Pass					
Berms	Pass					

Comment: [No sediment flow evident](#)

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
401551984	INSPECTION SUBMITTED	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4384059
689500603	Location	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4384054