

**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:

05/31/2018

Submitted Date:

06/01/2018

Document Number:

689500813**FIELD INSPECTION FORM**Loc ID 314307 Inspector Name: GRANAHAN, KYLE On-Site Inspection ☐ 2A Doc Num: _____**Operator Information:**OGCC Operator Number: 10539Name of Operator: UTAH GAS OP LTD DBA UTAH GAS CORPAddress: 1125 ESCALANTE DRCity: RANGELY State: CO Zip: 81648**Status Summary:**

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

Findings:7 Number of Comments0 Number of Corrective Actions☐ Corrective Action Response Requested**Contact Information:**

Contact Name	Phone	Email	Comment
Bleil, Rob	970-290-2912	rbleil@utahgascorp.com	

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
228287	WELL	PR	06/01/2002	GW	103-05113	DRAGON TRAIL UNIT 1001	PR

General Comment:[On location to conduct routine inspection](#)

LocationOverall Good: ☒

Signs/Marker:			
Type	BATTERY		
Comment:	Present/complete		
Corrective Action:		Date:	
Type	WELLHEAD		
Comment:	Present/complete		
Corrective Action:		Date:	
Type	TANK LABELS/PLACARDS		
Comment:	Present/complete		
Corrective Action:		Date:	

Emergency Contact Number:

Comment: 970-693-6021

Corrective Action:

Date: _____

Overall Good: ☒

Spills:			
Type	Area	Volume	

In Containment: No

Comment:

☐ Multiple Spills and Releases?

Fencing/:			
Type	TANK BATTERY		
Comment:			
Corrective Action:		Date:	

Equipment:			corrective date
Type: Gas Meter Run	# 1		
Comment:			
Corrective Action:		Date:	
Type: Plunger Lift	# 1		
Comment:			
Corrective Action:		Date:	
Type: Deadman # & Marked	# 4		
Comment:			
Corrective Action:		Date:	
Type: Dehydrator	# 1		
Comment:			
Corrective Action:		Date:	

Tanks and Berms:

Contents	#	Capacity	Type	Tank ID	SE GPS	
CONDENSATE	1	<50 BBLS	STEEL AST		,	
Comment:						
Corrective Action:						Date:

Paint

Condition	Adequate	
Other (Content)		
Other (Capacity)		
Other (Type)		

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance	
Metal	Adequate	Walls Sufficient	Base Sufficient	Adequate	
Comment:					
Corrective Action:					Date:

Venting:

Yes/No	NO		
Comment:			
Corrective Action:			Date:

Flaring:

Type			
Comment:			
Corrective Action:			Date:

Inspected Facilities									
Facility ID:	228287	Type:	WELL	API Number:	103-05113	Status:	PR	Insp. Status:	PR
Producing Well									
Comment:	Pr via plunger lift, no leaks/venting - no cellar present								
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						

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
689500814	Photos	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4482130