

**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:

09/07/2018

Submitted Date:

09/07/2018

Document Number:

680403709**FIELD INSPECTION FORM**
 Loc ID 322301 Inspector Name: BROWNING, CHUCK 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:**6 Number of Comments0 Number of Corrective Actions☐ Corrective Action Response Requested**Contact Information:**

Contact Name	Phone	Email	Comment
Labowskie, Steve		steve.labowskie@state.co.us	
Bleil, Rob	970-290-2912	rbleil@utahgascorp.com	<a href="#">All Inspections</a>
Browning, Chuck	970-433-4139	chuck.browning@state.co.us	<a href="#">Field Inspector</a>

**Inspected Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
210189	WELL	SI	01/01/2017	GW	045-05086	SOUTH CANYON-FEDERAL 2	SI

**General Comment:**[MIT to maintain SI/TA status.](#)

**Location**

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

Overall Good: ☒

<b>Signs/Marker:</b>			
Type	TANK LABELS/PLACARDS		
Comment:			
Corrective Action:		Date:	
Type	WELLHEAD		
Comment:			
Corrective Action:		Date:	

Emergency Contact Number:			
Comment:			
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:	Hogwire & T-post		
Corrective Action:		Date:	
Type	TANK BATTERY		
Comment:	Hogwire & T-post		
Corrective Action:		Date:	

<b>Equipment:</b>			corrective date
Type: Gas Meter Run	# 1		
Comment:			
Corrective Action:		Date:	
Type: Horizontal Heated Separator	# 1		
Comment:			
Corrective Action:		Date:	

Type: Deadman # & Marked	# 4	
Comment:		
Corrective Action:		Date:

**Tanks and Berms:**

Contents	#	Capacity	Type	Tank ID	SE GPS
PRODUCED WATER	1	100 BBLs	STEEL AST		39.497072,-108.952791
Comment:					
Corrective Action:					Date:

**Paint**

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

**Berms**

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Earth	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:	210189	Type:	WELL	API Number:	045-05086	Status:	SI	Insp. Status:	SI
Idle Well									
Purpose: <input checked="" type="checkbox"/> Shut In <input type="checkbox"/> Temporarily Abandoned Reminder: _____									
<div>Comment: MIT to maintain SI/TA status. Perfs 4039'-4062'. CIBP set @ 4010' Pressured casing to 350 psi. Hold for 15 min. Final pressure 349 psi. -1 psi loss. OK Test witnessed by COGCC using digital gauge on wellhead.</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	Compaction	Pass			

Comment:

Corrective Action:

Date:

Pits: ☐ NO SURFACE INDICATION OF PIT