

**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:

11/29/2018

Submitted Date:

11/29/2018

Document Number:

679701938**FIELD INSPECTION FORM**Loc ID 316058 Inspector Name: Moran, Rick 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**ANY CORRECTIVE ACTION(S) FROM  
PREVIOUS INSPECTIONS THAT HAVE NOT  
BEEN ADDRESSED ARE STILL APPLICABLE****Contact Information:**

| Contact Name    | Phone        | Email                       | Comment                                |
|-----------------|--------------|-----------------------------|--|
| Kellerby, Shaun | 970-712-1248 | shaun.kellerby@state.co.us  |  |
| Plummer, Ronnie |              | rplummer@utahgascorp.com    | Production manager, all inspections    |
| Waldron, Emily  |              | emily.waldron@state.co.us   |  |
| Knight, Russ    |              | rknight@utahgascorp.com     | President, all inspections             |
| Bleil, Robert   | 720-425-0303 | inspections@utahgascorp.com | All inspections                        |
| Hale, Steve     |              | shale@utahgascorp.com       | Environmental Manager, all inspections |

**Inspected Facilities:**

| Facility ID | Type | Status | Status Date | Well Class | API Num   | Facility Name                 | Insp Status |
|-------------|------|--------|-------------|------------|-----------|-------------------------------|-------------|
| 232018      | WELL | PR     | 08/16/1994  | GW         | 103-09689 | LOWER HORSE DRAW<br>UNIT 2155 | PR          |

**General Comment:**

routine well inspection

**Location**Overall Good: ☒

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

Emergency Contact Number:

Comment: 970-693-6021

Corrective Action:

Date: \_\_\_\_\_

Overall Good: ☒

|                |      |        |  |
|----------------|------|--------|--|
| <b>Spills:</b> |      |        |  |
| Type           | Area | Volume |  |

In Containment: No

Comment:

☐ Multiple Spills and Releases?

|                          |     |       |                 |
|--------------------------|-----|-------|-----------------|
| <b>Equipment:</b>        |     |       | corrective date |
| Type: Deadman # & Marked | # 4 |       |                 |
| Comment:                 |     |       |                 |
| Corrective Action:       |     | Date: |                 |
| Type: Gas Meter Run      | # 1 |       |                 |
| Comment:                 |     |       |                 |
| Corrective Action:       |     | Date: |                 |

**Tanks and Berms:**

|                    |   |          |          |         |                       |
|--------------------|---|----------|----------|---------|-----------------------|
| Contents           | # | Capacity | Type     | Tank ID | SE GPS                |
| PRODUCED WATER     | 1 | <50 BBLS | Open Top |         | 39.840890,-108.946080 |
| Comment:           |   |          |          |         |                       |
| Corrective Action: |   |          |          |         | Date:                 |

**Paint**

|                  |          |
|------------------|----------|
| Condition        | Adequate |
| Other (Content)  |          |
| Other (Capacity) | 30 bbl   |
| Other (Type)     |          |

**Berms**

Inspector Name: Moran, Rick

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

**Venting:**

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

**Flaring:**

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

|                             |                |                       |            |                  |
|-----------------------------|----------------|-----------------------|------------|------------------|
| <b>Inspected Facilities</b> |                |                       |            |                  |
| Facility ID: 232018         | Type: WELL     | API Number: 103-09689 | Status: PR | Insp. Status: PR |
| <b>Producing Well</b>       |                |                       |            |                  |
| Comment:                    | producing well |                       |            |                  |
| 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: 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   |
|--------------|------------------|---|
| 679701939    | inspection photo | <a href="http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4659739">http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4659739</a> |