

**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:

06/27/2019

Submitted Date:

07/10/2019

Document Number:

693800771**FIELD INSPECTION FORM**Loc ID 322421 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: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
Browning, Chuck	970-433-4139	chuck.browning@state.co.us	Field Inspector
Pesicka, Conor		conor.pesicka@state.co.us	
Bleil, Rob	970-290-2912	rbleil@utahgascorp.com	All Inspections
Labowskie, Steve		steve.labowskie@state.co.us	

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
210459	WELL	TA	04/01/2017	GW	045-06215	ATCHEE UNIT-FEDERAL P-29-6-103-S	TA

General Comment:

Followup inspection performed 6/27/2019. CA completed.

Location

Lease Road:			
Type	Main		
comment:			
Corrective Action		Date:	
Type	Access		
comment:			
Corrective Action		Date:	

Overall Good: ☒

Signs/Marker:			
Type	WELLHEAD		
Comment:	Sign on meter housing		
Corrective Action:		Date:	
Type	TANK LABELS/PLACARDS		
Comment:			
Corrective Action:		Date:	

Emergency Contact Number:		
Comment:		
Corrective Action:		Date: _____

Overall Good: ☒

Spills:			
Type	Area	Volume	

In Containment: No

Comment: _____

☐ Multiple Spills and Releases?

Fencing/:			
Type	WELLHEAD		
Comment:	Hogwire & T-post		
Corrective Action:		Date:	
Type	TANK BATTERY		
Comment:	Hogwire & T-post		
Corrective Action:		Date:	

Equipment:			corrective date
Type: Deadman # & Marked	# 4		
Comment:			
Corrective Action:		Date:	
Type: Horizontal Heated Separator	# 1		
Comment:			
Corrective Action:		Date:	

Type: Bradenhead	# 1	
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	<100 BBLs	PBV STEEL		,
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 FacilitiesFacility ID: 210459 Type: WELL API Number: 045-06215 Status: TA Insp. Status: TA**Idle Well**Purpose: ☐ Shut In ☒ Temporarily Abandoned

Reminder: _____

Comment: MIT performed 6/21/2019. Form 21 doc#402093684 approved.
CA from inspection doc#680404022 completed.

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

Document Num	Description	URL
693800847	Inspection photos 6/27/2019	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4873670