

**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:

08/06/2019

Submitted Date:

08/07/2019

Document Number:

680305375

FIELD INSPECTION FORM
 Loc ID 333104 Inspector Name: SCHURE, KYM On-Site Inspection ☐ 2A Doc Num:
Operator Information:

OGCC Operator Number: 72400

Name of Operator: PUBLIC SERVICE COMPANY OF COLORADO

Address: 1123 W 3RD AVE

City: DENVER State: CO Zip: 80223

Status Summary:

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

Findings:

5 Number of Comments

0 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
SCHNEIDE, JEFF R	970-867-9437	jeff@schneiderenergy.com	PRESIDENT
Quint, Craig		craig.quint@state.co.us	
Olowu, Nat	303-571-3699	nat.olowu@xcelenergy.com	Senior Gas Storage Reservoir Engineer

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
226689	WELL	IJ	12/01/2018	DSPW	087-07427	ROUNDUP 5 GAS STORAGE	AC

General Comment:
 UIC/MIT (5)yr. 2019 SATISFACTORY
 Form 42 Doc# 402122429 received
 Form 21 copy attached

Inspected FacilitiesFacility ID: 226689 Type: WELL API Number: 087-07427 Status: IJ Insp. Status: AC**Underground Injection Control**

UIC Violation: _____ Maximum Injection Pressure: _____

UIC Routine

Inj./Tube: Pressure or inches of Hg _____ Previous Test Pressure _____ MPP _____
 (e.g. 30 psig or -30" Hg) Inj Zone: LKTA

TC: Pressure or inches of Hg _____ Previous Test Pressure _____ Last MIT: 08/13/2014

Brhd: Pressure or inches of Hg _____ Previous Test Pressure _____ AnnMTReq: _____

Comment: _____

Corrective Action: _____ Date: _____

Method of Injection: _____

Test Type: 5 Year Tbg psi: -12 Csg psi: 518 BH psi: _____Insp. Status: PassComment: Casing held (518) psi. throughout duration of (15) min. test. Form 21 copy attached

Corrective Action: _____ Date: _____

COGCC Comments

Comment	User	Date
<u>UIC/MIT 2019 SATISFACTORY</u>	<u>schureky</u>	<u>08/07/2019</u>

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

Document Num	Description	URL
<u>680305390</u>	<u>Form 21 copy</u>	<u>http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4901635</u>