

**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:

10/09/2019

Submitted Date:

10/21/2019

Document Number:

689803194**FIELD INSPECTION FORM**

Loc ID 312803 Inspector Name: Waldron, Emily On-Site Inspection ☐ 2A Doc Num: \_\_\_\_\_

**Operator Information:**OGCC Operator Number: 95960Name of Operator: WEXPRO COMPANYAddress: P O BOX 45003City: SALT LAKE CITY State: UT Zip: 84145-**Status Summary:**

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

**Findings:**5 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 |
|--------------------|--------------|-------------------------------|---------|
| Fredrickson, Tammy | 307-352-7566 | Tammy.Fredrickson@questar.com |         |

**Inspected Facilities:**

| Facility ID | Type | Status | Status Date | Well Class | API Num   | Facility Name    | Insp Status |
|-------------|------|--------|-------------|------------|-----------|------------------|-------------|
| 222467      | WELL | PR     | 11/10/1994  | GW         | 081-05474 | CARL ALLEN "A" 8 | WK          |

**General Comment:**

Routine FIU inspection.

**Location**Overall Good: ☒**Signs/Marker:**

|                    |                                    |       |  |
|--------------------|------------------------------------|-------|--|
| Type               | BATTERY                            |       |  |
| Comment:           |                                    |       |  |
| Corrective Action: |                                    | Date: |  |
| Type               | WELLHEAD                           |       |  |
| Comment:           |                                    |       |  |
| Corrective Action: |                                    | Date: |  |
| Type               | OTHER                              |       |  |
| Comment:           | Workover sign at county road turn. |       |  |
| Corrective Action: |                                    | Date: |  |
| Type               | TANK LABELS/PLACARDS               |       |  |
| Comment:           |                                    |       |  |
| Corrective Action: |                                    | Date: |  |

Emergency Contact Number:

Comment: 1-800-341-3129

Corrective Action:

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

Overall Good: ☒**Spills:**

|      |      |        |  |  |
|------|------|--------|--|--|
| Type | Area | Volume |  |  |
|------|------|--------|--|--|

In Containment: No

Comment:

☐ Multiple Spills and Releases?**Venting:**

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

**Flaring:**

|                    |  |       |
|--------------------|--|-------|
| Type               |  |       |
| Comment:           |  |       |
| 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: No apparent soil migration; erosion or soil movement.

Corrective Action:

Date:

Pits: ☐ NO SURFACE INDICATION OF PIT