

FORM  
INSPRev  
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:

11/17/2019

Submitted Date:

11/25/2019

Document Number:

680305979

### FIELD INSPECTION FORM

Loc ID \_\_\_\_\_ Inspector Name: \_\_\_\_\_ On-Site Inspection   
312343 \_\_\_\_\_ SCHURE, KYM \_\_\_\_\_ 2A Doc Num: \_\_\_\_\_

**Operator Information:**

OGCC Operator Number: 10322  
Name of Operator: EAST CHEYENNE GAS STORAGE LLC  
Address: 10375 RICHMOND AVE SUITE 1900  
City: HOUSTON State: TX Zip: 77042

**Status Summary:**

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

**Findings:**

7 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
Schure, Kym		kym.schure@state.co.us	

**Inspected Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
264171	WELL	TA	12/19/2016	OW	075-40122	Gaylord 2	TA

**General Comment:**

FIR - P&A scheduled for 11/17/2019 Doc#402239875. FI Schure arrived on location @ approx. 7:00am, no P&A in process. Contacted Operator and was informed that P&A had been delayed. Performed pre-plug and abandon field inspection.

<b>Location</b>			
<b>Lease Road:</b>			
Type	Access		
comment:	Two track through cropland (wheat).		
Corrective Action:			Date:
Overall Good: <input type="checkbox"/>			
<b>Signs/Marker:</b>			
Type	WELLHEAD		
Comment:	Satisfactory		
Corrective Action:			Date:
Emergency Contact Number:			
Comment:	Satisfactory		
Corrective Action:			Date: _____
Overall Good: <input type="checkbox"/>			
<b>Spills:</b>			
Type	Area	Volume	
In Containment: No			
Comment:			
<input type="checkbox"/> Multiple Spills and Releases?			
<b>Equipment:</b>			
Type: Other	# 0		corrective date
Comment:	No change in equipment inventoried		
Corrective Action:			Date:
<b>Venting:</b>			
Yes/No			
Comment:			
Corrective Action:			Date:
<b>Flaring:</b>			
Type			
Comment:			
Corrective Action:			Date:

**Inspected Facilities**

Facility ID: 264171 Type: WELL API Number: 075-40122 Status: TA Insp. Status: TA

**Idle Well**

Purpose:  Shut In  Temporarily Abandoned Reminder: \_\_\_\_\_

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
Gravel	In Process	Other	In Process			

Comment: [Use BMP's until final reclamation is approved](#)

Corrective Action:

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

**Pits:**  NO SURFACE INDICATION OF PIT