

**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:

09/11/2020

Submitted Date:

09/15/2020

Document Number:

699601694

FIELD INSPECTION FORM
 Loc ID 312347 Inspector Name: SCHURE, KYM On-Site Inspection ☐ 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:

2 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
escobar, melisa		melisa.escobar@enstorinc.com	
Quint, Craig		craig.quint@state.co.us	

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
221223	WELL	TA	05/01/2020	ERIW	075-60034	UPRR WI-2	TA

General Comment:
 UIC-MIT SATISFACTORY
 Form 42 received
 Form 21 copy attached

NOTE TO OPERATOR: Submt Form 21 results to COGCC via e-form filing. Use this FIR Doc # for filing.

Inspected Facilities

Facility ID: 221223 Type: WELL API Number: 075-60034 Status: TA Insp. Status: TA

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: DK-J
 TC: Pressure or inches of Hg _____ Previous Test Pressure _____ Last MIT: 04/08/2019
 Brhd: Pressure or inches of Hg _____ Previous Test Pressure _____ AnnMTReq: _____

Comment: _____

Corrective Action: _____ Date: _____

Method of Injection: _____

Test Type: Verification of Repairs Tbg psi: _____ Csg psi: 329 BH psi: _____

Insp. Status: Pass

Comment: Casing pressure @ start = (330)psi. @ (5) min. = (329) psi. @ (10) min. = (329) psi. @ (15) min. = (329) psi. Loss or Gain = (-1)psi. SATISFACTORY
Form 21 attached

Corrective Action: _____ Date: _____