

**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:

01/08/2021

Submitted Date:

01/08/2021

Document Number:

700404898**FIELD INSPECTION FORM**Loc ID 315937 Inspector Name: Moran, Rick 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:8 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 |
|-----------------|--------------|-----------------------------|---------------------------------|
| , Utah Gas Corp | 720-425-0303 | inspections@utahgascorp.com | All inspections |

Inspected Facilities:

| Facility ID | Type | Status | Status Date | Well Class | API Num | Facility Name | Insp Status |
|-------------|------|--------|-------------|------------|-----------|------------------------|-------------|
| 231778 | WELL | PR | 09/01/2020 | GW | 103-09449 | DRAGON TRAIL UNIT 1326 | PR |

General Comment:[A follow up inspection of FIR document 700404680.](#)[The following compliance issues were resolved:](#)

- 1) [Secondary containment liner hole was patched.](#)

[This is a summary of inspection report 700404898.](#)

LocationOverall Good: ☒

| | | | |
|----------------------|----------------------|-------|--|
| Signs/Marker: | | | |
| Type | BATTERY | | |
| Comment: | | | |
| Corrective Action: | | Date: | |
| Type | WELLHEAD | | |
| Comment: | | | |
| Corrective Action: | | Date: | |
| Type | TANK LABELS/PLACARDS | | |
| Comment: | | | |
| Corrective Action: | | Date: | |
| Type | CONTAINERS | | |
| Comment: | | | |
| Corrective Action: | | Date: | |

Emergency Contact Number:

Comment: 911

Corrective Action:

Date: _____

Overall Good: ☒

| | | | |
|----------------|------|--------|--|
| Spills: | | | |
| Type | Area | Volume | |

In Containment: No

Comment:

☐ Multiple Spills and Releases?

| | | | |
|---------------------------|---------------------|-------|-----------------|
| Equipment: | | | corrective date |
| Type: Plunger Lift | # 1 | | |
| Comment: | | | |
| Corrective Action: | | Date: | |
| Type: Ancillary equipment | # 1 | | |
| Comment: | Chemical container. | | |
| Corrective Action: | | Date: | |
| Type: Bradenhead | # 1 | | |
| Comment: | Bradenhead access. | | |
| Corrective Action: | | Date: | |
| Type: Gas Meter Run | # 1 | | |
| Comment: | Telemetry. | | |
| Corrective Action: | | Date: | |
| Type: Deadman # & Marked | # 4 | | |
| Comment: | | | |

| | | | |
|--------------------|--|-------|--|
| Corrective Action: | | Date: | |
|--------------------|--|-------|--|

Tanks and Berms:

| Contents | # | Capacity | Type | Tank ID | SE GPS | |
|----------------|---|----------|----------|---------|--------|--|
| PRODUCED WATER | 1 | <50 BBLS | Open Top | | , | |

| | | | | | | |
|--------------------|--|--|--|--|-------|--|
| Comment: | | | | | | |
| Corrective Action: | | | | | Date: | |

Paint

| | | | | | |
|------------------|----------|--|--|--|--|
| Condition | Adequate | | | | |
| Other (Content) | | | | | |
| Other (Capacity) | 30 bbl | | | | |
| Other (Type) | | | | | |

Berms

| Type | Capacity | Permeability (Wall) | Permeability (Base) | Maintenance | | |
|--------------------|----------|---------------------|---------------------|-------------|-------|--|
| Metal | Adequate | Walls Sufficient | | Adequate | | |
| Comment: | | | | | | |
| Corrective Action: | | | | | Date: | |

Venting:

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

Flaring:

| | | | | |
|--------------------|--|--|-------|--|
| Type | | | | |
| Comment: | | | | |
| Corrective Action: | | | Date: | |

| Inspected Facilities | | | | | | | | | |
|----------------------|--------|-------|------|-------------|-----------|---------|----|---------------|----|
| Facility ID: | 231778 | Type: | WELL | API Number: | 103-09449 | Status: | PR | Insp. Status: | PR |
| Producing Well | | | | | | | | | |
| Comment: | | PR | | | | | | | |
| 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 |
|------------------|-----------------|-------------------------|-----------------------|--|--------------------------|---------|
| | | | | Material Handling And Spill Prevention | | |

Comment: 9" of snow on ground. Location plowed.

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 |
|--------------|-------------------|---|
| 700404899 | inspection photos | http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=5325979 |