

**FORM
INSP**Rev
X/20**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:

02/25/2021

Submitted Date:

02/25/2021

Document Number:

699602312**FIELD INSPECTION FORM**Loc ID 312232 Inspector Name: SCHURE, KYM On-Site Inspection ☐ 2A Doc Num: _____**Operator Information:**OGCC Operator Number: 95620Name of Operator: WESTERN OPERATING COMPANYAddress: 1165 DELAWARE STREET #200City: DENVER State: CO Zip: 80204**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
Quint, Craig		craig.quint@state.co.us	
James, Steven	(303) 893-2438	steve@westernoperating.com	

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
150053	UIC DISPOSAL	AC	07/13/1973		-	REINERS B-3	AC
219747	WELL	IJ	03/01/2020	DSPW	075-07033	REINERS B-3	IJ

General Comment:

UIC/MIT Reset packer SATISFACTORY
Form 42 Received
Form 21 Attached

Reset UIC/MIT (5)yr. Last MIT 3/31/2017

Location

Lease Road:			
Type	Access		
comment:	Two track grassland		
Corrective Action	L	Date:	

Overall Good: ☐

Signs/Marker:			
Type	WELLHEAD		
Comment:	Satisfactory		
Corrective Action:		Date:	

Emergency Contact Number:			
Comment:	Satisfactory		
Corrective Action:			Date: _____

Overall Good: ☒

Spills:				
Type	Area	Volume		

In Containment: No

Comment: NA

☐ Multiple Spills and Releases?

Equipment:			corrective date
Type: Other	# 0		
Comment:	No change in equipment inventoried		
Corrective Action:		Date:	

Tanks and Berms:

Contents	#	Capacity	Type	Tank ID	SE GPS
Comment:					
Corrective Action:					Date:

Paint

Condition	
Other (Content)	
Other (Capacity)	
Other (Type)	

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Comment:				
Corrective Action:				Date:

Venting:

Yes/No	NO		
Comment:			
Corrective Action:		Date:	

Flaring:

Type		
Comment:	None	
Corrective Action:		Date:

Inspected FacilitiesFacility ID: 150053 Type: UIC API Number: - Status: AC 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: _____

TC: Pressure or inches of Hg _____ Previous Test Pressure _____ Last MIT: _____

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

Comment: _____

Corrective Action: _____ Date: _____

Method of Injection: _____

Test Type: 5 Year Tbg psi: _____ Csg psi: 350 BH psi: _____Insp. Status: Pass

Comment: Verification of Repairs - Reset Packer - (5)yr. MIT performed
PSI before start = 0 PSI @ start = 375 PSI @ (5) min. = 350 PSI @ (10) min. = 350
PSI @ (15) min. = 350
Loss or Gain = -25 psi

Corrective Action: _____ Date: _____

Facility ID: 219747 Type: WELL API Number: 075-07033 Status: IJ Insp. Status: IJ

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 for erosion management](#)

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
699602313	Form 21	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=5361084