

**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:

12/20/2021

Submitted Date:

12/28/2021

Document Number:

689806825

**FIELD INSPECTION FORM**

Loc ID 312936 Inspector Name: Waldron, Emily On-Site Inspection  2A Doc Num: \_\_\_\_\_

**Status Summary:**

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

**Operator Information:**

OGCC Operator Number: 95960  
Name of Operator: WEXPRO COMPANY  
Address: P O BOX 45003  
City: SALT LAKE CITY State: UT Zip: 84145-

**Findings:**

3 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 |
|--------------------|--------------|-------------------------------|---------|
| 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 |
|-------------|------|--------|-------------|------------|-----------|---------------|-------------|
| 222931      | WELL | PR     | 02/16/1977  | GW         | 081-06293 | MFS 20-1      | PR          |

**General Comment:**

[Routine FIU inspection.](#)

**Location**

Overall Good:

**Signs/Marker:**

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

**Emergency Contact Number:**

Comment:

Corrective Action:

Date:

Overall Good:

**Spills:**

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

In Containment: No

Comment:

Multiple Spills and Releases?

**Equipment:**

| Type                              | #   |       | corrective date |
|-----------------------------------|-----|-------|-----------------|
| Type: Bird Protectors             | #   |       |                 |
| Comment:                          |     |       |                 |
| Corrective Action:                |     | Date: |                 |
| Type: Deadman # & Marked          | # 4 |       |                 |
| Comment:                          |     |       |                 |
| Corrective Action:                |     | Date: |                 |
| Type: Horizontal Heated Separator | # 1 |       |                 |
| Comment:                          |     |       |                 |
| Corrective Action:                |     | Date: |                 |
| Type: Horizontal Heater Treater   | # 1 |       |                 |
| Comment:                          |     |       |                 |
| Corrective Action:                |     | Date: |                 |
| Type: Bradenhead                  | # 1 |       |                 |
| Comment:                          |     |       |                 |
| Corrective Action:                |     | Date: |                 |

**Tanks and Berms:**

| Contents | # | Capacity | Type | Tank ID | SE GPS |
|----------|---|----------|------|---------|--------|
|          |   |          |      |         |        |

|                    |   |          |                  |  |       |
|--------------------|---|----------|------------------|--|-------|
| PRODUCED WATER     | 1 | 200 BBLs | HEATED STEEL AST |  |       |
| Comment:           |   |          |                  |  |       |
| Corrective Action: |   |          |                  |  | Date: |

**Paint**

|                  |            |  |
|------------------|------------|--|
| Condition        | Inadequate |  |
| Other (Content)  |            |  |
| Other (Capacity) |            |  |
| Other (Type)     |            |  |

**Berms**

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

| Contents           | # | Capacity | Type      | Tank ID | SE GPS |
|--------------------|---|----------|-----------|---------|--------|
| CONDENSATE         | 1 | 400 BBLs | STEEL AST |         |        |
| Comment:           |   |          |           |         |        |
| Corrective Action: |   |          |           |         | Date:  |

**Paint**

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

**Berms**

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

**Venting:**

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

**Flaring:**

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

**Inspected Facilities**

Facility ID: 222931 Type: WELL API Number: 081-06293 Status: PR Insp. Status: PR

**Producing Well**

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

**Attached Documents**

You can go to COGCC Images (<https://cogcc.state.co.us/weblink/>) and search by document number:

| Document Num | Description      | URL   |
|--------------|------------------|---|
| 689806826    | Inspection Photo | <a href="http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=5618321">http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=5618321</a> |