

FORM
INSPRev
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:

06/13/2022

Submitted Date:

06/16/2022

Document Number:

701601842

FIELD INSPECTION FORM

Loc ID 312240 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: 370 VAN GORDON STREET
City: LAKEWOOD State: CO Zip: 80228

Status Summary:

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

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

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
219775	WELL	IJ	01/01/2015	DSPW	075-07167	SCHWAKE A-1	UN

General Comment:

[UIC ROUTINE 2022](#)

Inspected Facilities

Facility ID: 219775 Type: WELL API Number: 075-07167 Status: IJ Insp. Status: UN

Underground Injection Control

UIC Violation: _____ Maximum Injection Pressure: _____

UIC Routine

Inj./Tube: Pressure or inches of Hg -1 Previous Test Pressure _____ MPP _____
 (e.g. 30 psig or -30" Hg) Inj Zone: OSND

TC: Pressure or inches of Hg 0 Previous Test Pressure _____ Last MIT: 06/12/2020

Brhd: Pressure or inches of Hg 0 Previous Test Pressure _____ AnnMTReq: _____

Comment: Tubing = (-1) vacuum Casing = 0

Corrective Action: _____ Date: _____

Method of Injection: GRAVITY FEED

Test Type: _____ Tbg psi: _____ Csg psi: _____ BH psi: _____

Insp. Status: _____

Comment: _____

Corrective Action: _____ Date: _____

COGCC Comments

Comment	User	Date
<u>UIC ROUTINE - SATISFACTORY</u>	schureky	06/16/2022