

**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:

11/23/2016

Submitted Date:

11/23/2016

Document Number:

673403881**FIELD INSPECTION FORM**

Loc ID 312844 Inspector Name: Waldron, Emily On-Site Inspection ☐ 2A Doc Num: \_\_\_\_\_

**Operator Information:**OGCC Operator Number: 95960Name of Operator: WEXPRO COMPANYAddress: P O BOX 45003City: SALT LAKE CITY State: UT Zip: 84145-**Status Summary:**

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

**Findings:**2 Number of Comments0 Number of Corrective Actions☐ Corrective Action Response Requested**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
222564	WELL	PR	09/11/2000	GW	081-05583	WILSON F 6	PR

**General Comment:**

**Location**Overall Good: ☒**Signs/Marker:**

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

Emergency Contact Number:

Comment: 1-800-341-3129

Corrective Action:

Date: \_\_\_\_\_

Overall Good: ☒**Spills:**

Type	Area	Volume		
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In Containment: No

Comment:

☐ Multiple Spills and Releases?**Equipment:**

Type: Bird Protectors	#		corrective date
Comment:			
Corrective Action:		Date:	
Type: Deadman # & Marked	# 4		
Comment:			
Corrective Action:		Date:	
Type: Horizontal Heated Separator	# 1		
Comment:			
Corrective Action:		Date:	

**Tanks and Berms:**

Contents	#	Capacity	Type	Tanak ID	SE GPS
PRODUCED WATER	1	200 BBLS	HEATED STEEL AST		,
Comment:					
Corrective Action:		Date:			

**Paint**

Condition	Adequate
Other (Content)	

Other (Capacity)					
Other (Type)					
<b>Berms</b>					
Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance	
Metal	Adequate			Adequate	
Comment:					
Corrective Action:					Date:
<b>Venting:</b>					
Yes/No	NO				
Comment:					
Corrective Action:					Date:
<b>Flaring:</b>					
Type					
Comment:					
Corrective Action:					Date:

<b>Inspected Facilities</b>			
Facility ID: <u>222564</u>	Type: <u>WELL</u>	API Number: <u>081-05583</u>	Status: <u>PR</u> Insp. Status: <u>PR</u>
<b>Producing Well</b>			
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