

**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:

07/17/2018

Submitted Date:

07/18/2018

Document Number:

680303569**FIELD INSPECTION FORM**Loc ID 313646 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 Comments1 Number of Corrective Actions☒ Corrective Action Response Requested**Contact Information:**

Contact Name	Phone	Email	Comment
James, Steven	(303) 893-2438	steve@westernoperating.com	
Burn, Diana		diana.burn@state.co.us	
Koehler, Bob		bob.koehler@state.co.us	
Quint, Craig		craig.quint@state.co.us	

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
224693	WELL	IJ	10/15/2011	ERIW	087-05077	SAND RIVER 16	UN

General Comment:

UIC/MIT - FAILED - Last UIC/MIT (5yr.) 07/19/2013 - Doc#200383206 - Repair and pass MIT or Plug well within (6) months from date of this FIR. Well is required to remain SI until approved MIT is attained or well is P&A.

Form 42 Doc# 401699252 received

Form 21 - No Form 21 submitted for failed test.

Contact: COGCC UIC Manager (Bob Koehler) for directives.

Location**Lease Road:**

Type	Access		
comment:	Satisfactory		
Corrective Action:		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		
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In Containment: No

Comment: _____

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

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

Venting:

Yes/No			
Comment:			
Corrective Action:		Date:	

Flaring:

Type		
Comment:		
Corrective Action:		Date:

Inspected Facilities

Facility ID: 224693 Type: WELL API Number: 087-05077 Status: IJ Insp. Status: UN

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: DSND
 TC: Pressure or inches of Hg _____ Previous Test Pressure _____ Last MIT: 07/19/2013
 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: _____ BH psi: _____

Insp. Status: Fail Leak Type: Casing

Comment: Well did not hold pressure. Contact COGCC UIC Group: (Bob Koehler) for directives.

Corrective Action: Well must remain Shut In until capable if passing MIT. Repair and pass MIT "or" Plug well, withing (6) months of this FIR date. Date: 01/17/2019

Reclamation - Storm Water - Pit**Storm Water:**

Loc Erosion BMPs	BMP Maintenance	Lease Road Erosion BMPs	Lease BMP Maintenance	Chemical BMPs	Chemical BMP Maintenance	Comment
Other	In Process	Other	In Process			

Comment: [Use BMP's for stormwater erosion management](#)

Corrective Action:

Date: _____

Pits: ☐ NO SURFACE INDICATION OF PIT**COGCC Comments**

Comment	User	Date
IJ UIC/MIT test failed. Contact COGCC UIC : Bob Koehler for directives	schureky	07/17/2018

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

Document Num	Description	URL
401706413	INSPECTION SUBMITTED	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4526409