

**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:

10/03/2018

Submitted Date:

10/03/2018

Document Number:

680403874

**FIELD INSPECTION FORM**

Loc ID 312435 Inspector Name: BROWNING, CHUCK 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: 10539  
Name of Operator: UTAH GAS OP LTD DBA UTAH GAS CORP  
Address: 1125 ESCALANTE DR  
City: RANGELY State: CO Zip: 81648

**Findings:**

- 6 Number of Comments
- 1 Number of Corrective Actions
- Corrective Action Response Requested

**Contact Information:**

| Contact Name     | Phone        | Email                       | Comment         |
|------------------|--------------|-----------------------------|-----------------|
| Browning, Chuck  | 970-433-4139 | chuck.browning@state.co.us  | Field Inspector |
| Bleil, Rob       | 970-290-2912 | rbleil@utahgascorp.com      | All Inspections |
| Labowskie, Steve |              | steve.labowskie@state.co.us |                 |

**Inspected Facilities:**

| Facility ID | Type | Status | Status Date | Well Class | API Num   | Facility Name   | Insp Status |
|-------------|------|--------|-------------|------------|-----------|-----------------|-------------|
| 221596      | WELL | SI     | 06/01/2018  | OW         | 077-08198 | GOVERNMENT 31-1 | SI          |

**General Comment:**

**Location**

|                    |        |  |       |
|--------------------|--------|--|-------|
| <b>Lease Road:</b> |        |  |       |
| Type               | Main   |  |       |
| comment:           |        |  |       |
| Corrective ActionL |        |  | Date: |
| Type               | Access |  |       |
| comment:           |        |  |       |
| Corrective ActionL |        |  | Date: |

Overall Good:

|                      |                            |  |       |
|----------------------|----------------------------|--|-------|
| <b>Signs/Marker:</b> |                            |  |       |
| Type                 | WELLHEAD                   |  |       |
| Comment:             | Sign at location entrance. |  |       |
| Corrective Action:   |                            |  | Date: |
| Type                 | TANK LABELS/PLACARDS       |  |       |
| Comment:             |                            |  |       |
| Corrective Action:   |                            |  | Date: |

|                                  |                      |  |             |
|----------------------------------|----------------------|--|-------------|
| <b>Emergency Contact Number:</b> |                      |  |             |
| Comment:                         | <input type="text"/> |  |             |
| Corrective Action:               | <input type="text"/> |  | Date: _____ |

Overall Good:

|  |                      |        |  |
|--|----------------------|--------|--|
| <b>Spills:</b>   |                      |        |  |
| Type   | Area                 | Volume |  |
| In Containment:  | No                   |        |  |
| Comment:   | <input type="text"/> |        |  |
| <input type="checkbox"/> Multiple Spills and Releases? |                      |        |  |

|                    |                            |  |       |
|--------------------|----------------------------|--|-------|
| <b>Fencing/:</b>   |                            |  |       |
| Type               | WELLHEAD                   |  |       |
| Comment:           | Pipe fence around wellhead |  |       |
| Corrective Action: |                            |  | Date: |

|                                   |   |  |                  |
|-----------------------------------|---|--|------------------|
| <b>Equipment:</b>                 |   |  | corrective date  |
| Type: Horizontal Heated Separator | # 1                                     |  |                  |
| Comment:                          |   |  |                  |
| Corrective Action:                |   |  | Date:            |
| Type: Deadman # & Marked          | # 4                                     |  |                  |
| Comment:                          |   |  |                  |
| Corrective Action:                |   |  | Date:            |
| Type: Flow Line                   | # 1                                     |  |                  |
| Comment:                          | 4" open riser on SE corner of location. |  |                  |
| Corrective Action:                | Comply with Rule 603.f .                |  | Date: 11/07/2018 |

**Tanks and Berms:**

| Contents           | # | Capacity | Type      | Tank ID | SE GPS                |
|--------------------|---|----------|-----------|---------|-----------------------|
| CONDENSATE         | 1 | 400 BBLs | STEEL AST |         | 39.312908,-108.921758 |
| Comment:           |   |          |           |         |                       |
| Corrective Action: |   |          |           |         | Date:                 |

**Paint**

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

**Berms**

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

**Venting:**

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

**Flaring:**

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

**Inspected Facilities**

Facility ID: 221596 Type: WELL API Number: 077-08198 Status: SI Insp. Status: SI

**Idle Well**

Purpose:  Shut In  Temporarily Abandoned Reminder: \_\_\_\_\_

Comment: Well shut in 10/2017. No MIT on record.  
MIT due by 10/2019.

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 |
|------------------|-----------------|-------------------------|-----------------------|-----------------|--------------------------|---------|
| Compaction       | Pass            | Compaction              | Pass                  | Self Inspection | Pass                     |         |

Comment:

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   |
|--------------|-----------------------------|---|
| 401783512    | INSPECTION SUBMITTED        | <a href="http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4597490">http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4597490</a> |
| 680403879    | Inspection photos 10/3/2018 | <a href="http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4597486">http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4597486</a> |