

**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:

03/13/2020

Submitted Date:

03/15/2020

Document Number:

700400482**FIELD INSPECTION FORM**Loc ID 315849 Inspector Name: Moran, Rick On-Site Inspection ☐ 2A Doc Num: _____**Operator Information:**OGCC Operator Number: 10539Name of Operator: UTAH GAS OP LTD DBA UTAH GAS CORPAddress: 1125 ESCALANTE DRCity: RANGELY State: CO Zip: 81648**Status Summary:**

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

Findings:5 Number of Comments0 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 |
|-----------------|--------------|-----------------------------|---------------------------------|
| , Utah Gas Corp | 720-425-0303 | inspections@utahgascorp.com | All inspections |

Inspected Facilities:

| Facility ID | Type | Status | Status Date | Well Class | API Num | Facility Name | Insp Status |
|-------------|------|--------|-------------|------------|-----------|------------------------|-------------|
| 231666 | WELL | PR | 09/01/1989 | GW | 103-09337 | DRAGON TRAIL UNIT 1078 | PR |

General Comment:[COGCC Inspection Report Summary.](#)[On 3-13-2020 at approximately 8:40, inspector Rick Moran, conducted a routine inspection at Dragon Trail Unit 1078 in Rio Blanco county.](#)[No corrective actions were identified.](#)[This is a summary of inspection report 700400482.](#)

LocationOverall Good: ☒**Signs/Marker:**

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

Emergency Contact Number:

Comment: 911

Corrective Action:

Date: _____

Overall Good: ☒**Spills:**

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

In Containment: No

Comment:

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

| | | | |
|---------------------------|------------------------|-------|-----------------|
| Type: Deadman # & Marked | # 3 | | corrective date |
| Comment: | | | |
| Corrective Action: | | Date: | |
| Type: Gas Meter Run | # 1 | | |
| Comment: | | | |
| Corrective Action: | | Date: | |
| Type: Ancillary equipment | # 1 | | |
| Comment: | Container of methanol. | | |
| Corrective Action: | | Date: | |
| Type: Plunger Lift | # 1 | | |
| Comment: | | | |
| Corrective Action: | | Date: | |

Tanks and Berms:

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

| | | | | | | |
|--------------------|----------|---------------------|---------------------|-------------|---|-------|
| CONDENSATE | 1 | <50 BBLs | Open Top | | , | |
| Comment: | | | | | | |
| Corrective Action: | | | | | | Date: |
| Paint | | | | | | |
| Condition | Adequate | | | | | |
| Other (Content) | | | | | | |
| Other (Capacity) | 45 bbl | | | | | |
| Other (Type) | | | | | | |
| Berms | | | | | | |
| Type | Capacity | Permeability (Wall) | Permeability (Base) | Maintenance | | |
| Earth | Adequate | | | Adequate | | |
| Comment: | | | | | | |
| Corrective Action: | | | | | | Date: |
| Venting: | | | | | | |
| Yes/No | | | | | | |
| Comment: | | | | | | |
| Corrective Action: | | | | | | Date: |
| Flaring: | | | | | | |
| Type | | | | | | |
| Comment: | | | | | | |
| Corrective Action: | | | | | | Date: |

| Inspected Facilities | | | | |
|----------------------|------------|-----------------------|------------|------------------|
| Facility ID: 231666 | Type: WELL | API Number: 103-09337 | Status: PR | Insp. Status: PR |
| Producing Well | | | | |
| Comment: | PR | | | |
| 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 |
|------------------|-----------------|-------------------------|-----------------------|--|--------------------------|---------|
| | | | | Material Handling And Spill Prevention | 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 |
|--------------|------------------|---|
| 700400483 | inspection photo | http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=5096705 |