

**FORM
INSP**

Rev
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:

12/09/2023

Submitted Date:

12/09/2023

Document Number:

702502188

FIELD INSPECTION FORM

Loc ID 312856 Inspector Name: Burchett, Kirby 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: 95960
Name of Operator: WEXPRO COMPANY
Address: P O BOX 45003
City: SALT LAKE CITY State: UT Zip: 84145-

Findings:

4 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
Wilson, Justin	(970) 878-3825	jrwilson@blm.gov	
Fredrickson, Tammy	(307) 352-7514	tammy.fredrickson@dominionenergy.com	

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
222620	WELL	IJ	02/01/2017	DSPW	081-05712	WILSON, F 21	IJ

General Comment:

[ECMC Inspection Report Summary](#)

On Friday, 12/08/2023, Inspector Kirby Burchett, conducted a Routine UIC inspection at Wexpro Company on the Wilson, F #21 UIC well, Location #312856, in Moffat County, Colorado. This location is within or in close proximity to a Parks and Wildlife (CPW) District with High Priority, NSO, Density and Other Consultation Habitat regulations.

Any Corrective Actions from previous Inspections are still applicable.

No injection at time of inspection. Verification of tubing and casing pressures. Last MIT – 3/19/2019.

No follow up inspection is required.

Location

Overall Good:

Signs/Marker:

	Type WELLHEAD		
Comment:			
Corrective Action:		Date:	

Emergency Contact Number:

Comment:	(800) 341-3129 or 911		
Corrective Action:		Date:	_____

Overall Good:

Spills:

Type	Area	Volume			

In Containment: No

Comment:

Multiple Spills and Releases?

Equipment:

	Type: Bradenhead	# 1		corrective date
Comment:				
Corrective Action:				Date:

Venting:

Yes/No	NO		
Comment:			
Corrective Action:			
		Date:	

Flaring:

Type			
Comment:			
Corrective Action:			
		Date:	

Inspected Facilities

Facility ID: 222620 Type: WELL API Number: 081-05712 Status: IJ Insp. Status: IJ

Underground Injection Control

UIC Violation: _____ Maximum Injection Pressure: _____

UIC Routine

Inj./Tube: Pressure or inches of Hg 14 psi Previous Test Pressure _____ MPP _____
(e.g. 30 psig or -30" Hg) Inj Zone: WSTC

TC: Pressure or inches of Hg -7 psi Previous Test Pressure _____ Last MIT: 03/19/2019

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

Comment: No injection at time of inspection.
MIT - 3/19/2019.

Corrective Action: _____ Date: _____

Method of Injection: _____

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

Insp. Status: _____

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: Operator is responsible for maintaining Best Management Practices (BMPs) to control vehicle tracking and potential sediment discharges from operational roads, well pads, and other unpaved surfaces.

Corrective Action:

Date: _____

Pits: NO SURFACE INDICATION OF PIT