

**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:

11/20/2018

Submitted Date:

11/20/2018

Document Number:

679701813

FIELD INSPECTION FORM

Loc ID 316070 Inspector Name: Moran, Rick On-Site Inspection 2A Doc Num: _____

Status Summary:

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

Findings:

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

ANY CORRECTIVE ACTION(S) FROM PREVIOUS INSPECTIONS THAT HAVE NOT BEEN ADDRESSED ARE STILL APPLICABLE

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

Contact Information:

Contact Name	Phone	Email	Comment
Hale, Steve		shale@utahgascorp.com	Environmental Manager, all inspections
Bleil, Robert	720-425-0303	inspections@utahgascorp.com	All inspections
Kellerby, Shaun	970-712-1248	shaun.kellerby@state.co.us	
Knight, Russ		rknight@utahgascorp.com	President, all inspections
Plummer, Ronnie		rplummer@utahgascorp.com	Production manager, all inspections
Waldron, Emily		emily.waldron@state.co.us	

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
232035	WELL	SI	02/01/2018	GW	103-09706	CATHEDRAL FEDERAL 27-13	SI

General Comment:

[routine well inspection](#)

Location

Overall Good:

Signs/Marker:			
Type	CONTAINERS		
Comment:	Sign or label not posted or information inaccurate on tanks or containers		
Corrective Action:	Install sign to comply with Rule 210.d.	Date:	01/18/2019
Type	BATTERY		
Comment:			
Corrective Action:		Date:	

Emergency Contact Number:			
Comment:	970-693-6021		Date:
Corrective Action:			Date: _____

Overall Good:

Spills:			
Type	Area	Volume	

In Containment: No

Comment:

Multiple Spills and Releases?

Equipment:			corrective date
Type: Horizontal Heated Separator	# 1		
Comment:			
Corrective Action:		Date:	
Type: Deadman # & Marked	# 4		
Comment:			
Corrective Action:		Date:	
Type: Gas Meter Run	# 1		
Comment:			
Corrective Action:		Date:	
Type: Bird Protectors	# 1		
Comment:			
Corrective Action:		Date:	
Type: Plunger Lift	# 1		
Comment:			
Corrective Action:		Date:	

Tanks and Berms:

Contents	#	Capacity	Type	Tank ID	SE GPS
PRODUCED WATER	1	<50 BBLS	Open Top		39.842470,-108.724820
Comment:					

Corrective Action:	Date:
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Paint

Condition	Adequate		
Other (Content)			
Other (Capacity)	30 bbl		
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: 232035 Type: WELL API Number: 103-09706 Status: SI Insp. Status: SI

Idle Well

Purpose: Shut In Temporarily Abandoned Reminder: _____

Comment: Valves at well head shut in.

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:

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
679701814	inspection photos	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4652457