



WV DEPARTMENT OF ENVIRONMENTAL PROTECTION
OFFICE OF OIL AND GAS
UIC INSPECTION REPORT

Operator Name	HG Energy, LLC		
API #	47-087-01056	UIC Permit #	EXPIRED 2D08701056001
Operator Well #	W-19	Field Name	NA
UTM NAD83 N	4290085.4	UTM NAD83 E	477218.76
2D Commercial	2D Non-Commercial <input checked="" type="checkbox"/>	2R	3S
Permit Expiration Date	EXPIRED 6/24/14	Last MIT Date (well)	04/09/2014
Permitted Injection Pressure (Psi)	None	Permitted Injection Rate (Bbl/Hr)	None
Inspected Injection Pressure (Psi)		Inspected Injection Rate (Bbl/Hr)	
Inspected Annulus Pressure(s) (Psi) (Specify annulus):			

Weather Conditions	Sunny		
Inspection Type:	Routine / Periodic	MIT Witness	
	Emergency Response / Complaint	Other	
Well Status	Active	Shut-In	Abandoned <input checked="" type="checkbox"/> Plugged
Well Status Updated?			

Site/Location Checklist	Y	N	NA	Comment
Properly Maintained	<input checked="" type="checkbox"/>			
Culverts Properly Sized and Spaced	<input checked="" type="checkbox"/>			
Diversion Ditches in Place	<input checked="" type="checkbox"/>			
Disturbed Areas Reclaimed	<input checked="" type="checkbox"/>			
Evidence of Environmental Impacts	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		
Adequate Site Security/Safety	<input checked="" type="checkbox"/>			
Adequate Pollution Control	<input checked="" type="checkbox"/>			
SPCC Plan Available	<input checked="" type="checkbox"/>			
UIC Permit Available	<input checked="" type="checkbox"/>			
Manifests Available	<input checked="" type="checkbox"/>			
WR-40's available for review	<input checked="" type="checkbox"/>			
Haulers Approved (2D Commercial)	<input checked="" type="checkbox"/>			
WR-40 Reporting current	<input checked="" type="checkbox"/>			
Complying with the groundwater protection plan	<input checked="" type="checkbox"/>			
Any Changes/alterations/additions since last inspection		<input checked="" type="checkbox"/>		
Adequate Secondary Containment	<input checked="" type="checkbox"/>			
Spill Kit	<input checked="" type="checkbox"/>			
Safety Equipment	<input checked="" type="checkbox"/>			
Permit Conditions Being Met	<input checked="" type="checkbox"/>			
Stream sampling current (9 mo. Cycles, permits issued since 2016)			<input checked="" type="checkbox"/>	
Injectate Sampling (if applicable)			<input checked="" type="checkbox"/>	
Corrective Action (if applicable)		<input checked="" type="checkbox"/>		
DAQ Determination (if applicable)			<input checked="" type="checkbox"/>	
Comments on site/location:				

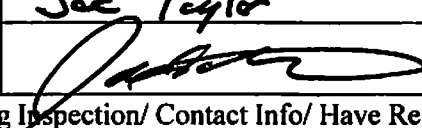
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87-1056

Well Checklist	Y	N	NA	Comment
API Number Tag	X			
Corrosion or pitting on well casings, wellhead, or valves		X		
Properly Maintained	X			
Wells Fluids Being Collected			X	
Gauges / Pressure Recorder installed properly	X			
Barrel Counter	X			
Fluid Level Reported (if applicable)			X	
Injection pump leaking		X		
Injection Line leaking		X		
Comments on Well:				

Tank Checklist	Y	N	NA	Comment
Properly Maintained (rust, holes, pitting)	X		X	
Number of Tanks			X	1- water / 2-oil
Capacity Largest AST			X	100 barrel capacity / 2-20 oil tanks.
Registration Numbers Labeled	X			
Adequate Secondary Containment	X			
Tank Leaking		X		
Adequate Locking Valves	X			
Equalizing lines			X	
Manholes/operating valves Secured	X			
Dike Drain Valves Closed	X			
Anchored/Armored (if located within floodplain)			X	
Lines with Manifold Layout			X	
Comments on Tank(s): 1- 100 barrel water tanks (not on location) 2- 20 oil tanks (not on location.)				

Were Photographs or Video taken?	Yes	No
Attachments? Site/Facility sketch/ Drawing?	Yes	No
Were Enforcement Actions taken as a result of this inspection?	Yes	No
If Yes, Specify		
NOV # (if written)		

Inspector Name	Joe Taylor	Inspection Date	3-22-17
Inspector Signature			
Others Present During Inspection/ Contact Info/ Have Representative Initial			