


FORM INSP Rev 05/11	State of Colorado Oil and Gas Conservation Commission 1120 Lincoln Street, Suite 801, Denver, Colorado 80205 Phone: (303) 894-2100 Fax: (303) 894-2109		DE	ET	OE	ES
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Inspection Date:
01/11/2012

Document Number:
663800065

Overall Inspection:
Satisfactory

FIELD INSPECTION FORM

Location Identifier	Facility ID	Loc ID	Tracking Type	Inspector Name: <u>LONGWORTH, MIKE</u>
	<u>268492</u>	<u>335454</u>		

Operator Information:

OGCC Operator Number: 100185 Name of Operator: ENCANA OIL & GAS (USA) INC

Address: 370 17TH ST STE 1700

City: DENVER State: CO Zip: 80202-

Contact Information:

Contact Name	Phone	Email	Comment
Friesen, Kathy	970-285-2665	Kathy.Friesen@EnCana.com	

Compliance Summary:

QtrQtr: NWNE Sec: 30 Twp: 6S Range: 92W

Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Unsatisfactory	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
09/19/2003	200048870	CO	WO	S		P	N
12/10/2008	200200459	PR	PR	S			N
09/17/2003	200051373	PR	PR	S	I	P	N
10/06/2005	200083912	PR	PR	S		P	N
10/06/2004	200064526	PR	PR	S		P	N

Inspector Comment:

Related Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	
268492	WELL	PR	11/07/2003	OW	045-09266	EM 30-7 (B30NE)	<input checked="" type="checkbox"/>
268493	WELL	PR	02/19/2004	OW	045-09267	EM 30-2 (B30NE)	<input checked="" type="checkbox"/>
272098	WELL	PR	01/04/2005	GW	045-10023	BRYNILDSON 30-3 (B30NE)	<input checked="" type="checkbox"/>
272107	WELL	PR		GW	045-10025	BRYNILDSON 30-6 (B30NE)	<input checked="" type="checkbox"/>
273518	WELL	PR	01/18/2005	GW	045-10257	BRYNILDSON 30-8 (B30NE)	<input checked="" type="checkbox"/>
273554	WELL	PR	01/14/2005	GW	045-10259	BRYNILDSON 30-1 (B30NE)	<input checked="" type="checkbox"/>
282001	WELL	AL	05/24/2011	LO	045-11616	BRYNILDSON 30-7C (B30NE)	<input type="checkbox"/>
282004	WELL	AL	05/24/2011	LO	045-11617	BRYNILDSON 30-2C (B30NE)	<input type="checkbox"/>
282007	WELL	AL	05/24/2011	LO	045-11614	BRYNILDSON 30-1D (B30NE)	<input type="checkbox"/>
282008	WELL	AL	05/24/2011	LO	045-11615	BRYNILDSON 30-6C (B30NE)	<input type="checkbox"/>
282009	WELL	AL	05/24/2011	LO	045-11613	BRYNILDSON 30-8C (B30NE)	<input type="checkbox"/>
282074	WELL	AL	05/24/2011	LO	045-11620	BRYNILDSON 30-3D (B30NE)	<input type="checkbox"/>

Equipment: Location Inventory

Special Purpose Pits: _____	Drilling Pits: _____	Wells: _____	Production Pits: _____
Condensate Tanks: _____	Water Tanks: _____	Separators: _____	Electric Motors: _____
Gas or Diesel Mortors: _____	Cavity Pumps: _____	LACT Unit: _____	Pump Jacks: _____
Electric Generators: _____	Gas Pipeline: _____	Oil Pipeline: _____	Water Pipeline: _____
Gas Compressors: _____	VOC Combustor: _____	Oil Tanks: _____	Dehydrator Units: _____
Multi-Well Pits: _____	Pigging Station: _____	Flare: _____	Fuel Tanks: _____

Location

Lease Road:				
Type	Satisfactory/Unsatisfactory	comment	Corrective Action	Date
Access	Satisfactory			

Signs/Marker:				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
BATTERY	Satisfactory			
WELLHEAD	Satisfactory			
CONTAINERS	Satisfactory			
TANK LABELS/PLACARDS	Unsatisfactory	Methanol needs additional info	Install sign to comply with rule 210.d.	02/15/2012

Emergency Contact Number: (S/U/V) Satisfactory Corrective Date: _____

Comment: _____

Corrective Action: _____

Good Housekeeping:				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
WEEDS	Unsatisfactory	continue weed control	continue weed control	05/01/2012
OTHER	Unsatisfactory	condensate staining on and around tanks inside of berm	clean up tanks and containment	02/15/2012

Spills:				
Type	Area	Volume	Corrective action	CA Date
<input type="checkbox"/> Multiple Spills and Releases?				

Fencing/:				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
WELLHEAD	Satisfactory			
SEPARATOR	Satisfactory			

Equipment:					
Type	#	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
Horizontal Heated Separator	6	Satisfactory			
Bird Protectors	3	Satisfactory			
Plunger Lift	6	Satisfactory			

Tanks/Berms: New Tank Tank ID: _____

Contents	#	Capacity	Type	SE GPS
METHANOL	1	<50 BBLS	STEEL AST	,

S/U/V: Satisfactory Comment: housekeeping and labeling for Methanol tank

Corrective Action: Clean tanks and berm. Label metanol tank with contact info and volume Corrective Date: **02/15/2012**

Paint

Condition	Adequate
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Other (Content) _____

Other (Capacity) _____

Other (Type) _____

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Metal	Adequate	Walls Sufficient	Base Sufficient	Adequate

Corrective Action _____ Corrective Date _____

Comment _____

Tanks/Berms: New Tank Tank ID: _____

Contents	#	Capacity	Type	SE GPS
CONDENSATE	3	300 BBLS	STEEL AST	39.501850,107.707370

S/U/V: Unsatisfactory Comment: house keeping

Corrective Action: Clean condensate staining off tanks and inside of berm Corrective Date: **02/15/2012**

Paint

Condition	Adequate
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Other (Content) _____

Other (Capacity) _____

Other (Type) _____

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance

Corrective Action _____ Corrective Date _____

Comment _____

Venting:

Yes/No	Comment

Flaring:

Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date

Predrill

Location ID: 335454

Site Preparation:

Lease Road Adeq.: _____ Pads: _____ Soil Stockpile: _____
 Corrective Action: _____ Date: _____ CDP Num.: _____

Form 2A COAs:

Wildlife BMPs:

Stormwater:

Comment: _____

Staking:

On Site Inspection (305):

Surface Owner Contact Information:

Name: _____ Address: _____
 Phone Number: _____ Cell Phone: _____

Operator Rep. Contact Information:

Landman Name: _____ Phone Number: _____
 Date Onsite Request Received: _____ Date of Rule 306 Consultation: _____

Request LGD Attendance: _____

LGD Contact Information:

Name: _____ Phone Number: _____ Agreed to Attend: _____

Summary of Landowner Issues:

Summary of Operator Response to Landowner Issues:

Onsite Inspection Memorandum Summarizing Discussions at Inspection as Attachment:

Well

Facility ID: <u>268492</u>	API Number: <u>045-09266</u>	Status: <u>PR</u>	Insp. Status: <u>PR</u>
Facility ID: <u>268493</u>	API Number: <u>045-09267</u>	Status: <u>PR</u>	Insp. Status: <u>PR</u>
Facility ID: <u>272098</u>	API Number: <u>045-10023</u>	Status: <u>PR</u>	Insp. Status: <u>PR</u>
Facility ID: <u>272107</u>	API Number: <u>045-10025</u>	Status: <u>PR</u>	Insp. Status: <u>PR</u>
Facility ID: <u>273518</u>	API Number: <u>045-10257</u>	Status: <u>PR</u>	Insp. Status: <u>PR</u>
Facility ID: <u>273554</u>	API Number: <u>045-10259</u>	Status: <u>PR</u>	Insp. Status: <u>PR</u>

Environmental

Spills/Releases:

Type of Spill: _____ Description: _____ Estimated Spill Volume: _____
 Comment: _____
 Corrective Action: _____ Date: _____

Reportable: _____ GPS: Lat _____ Long _____
Proximity to Surface Water: _____ Depth to Ground Water: _____

Water Well: _____ Lat _____ Long _____
DWR Receipt Num: _____ Owner Name: _____ GPS : _____

Field Parameters: _____

Sample Location: _____

Emission Control Burner (ECB): _____
Comment: _____
Pilot: _____ Wildlife Protection Devices (fired vessels): _____

Reclamation - Storm Water - Pit

Interim Reclamation:
Date Interim Reclamation Started: _____ Date Interim Reclamation Completed: _____
Land Use: _____
Comment: _____

1003a. Debris removed? _____ CM _____
CA _____ CA Date _____
Waste Material Onsite? _____ CM _____
CA _____ CA Date _____
Unused or unneeded equipment onsite? _____ CM _____
CA _____ CA Date _____
Pit, cellars, rat holes and other bores closed? _____ CM _____
CA _____ CA Date _____
Guy line anchors removed? _____ CM _____
CA _____ CA Date _____
Guy line anchors marked? _____ CM _____
CA _____ CA Date _____

1003b. Area no longer in use? _____ Production areas stabilized ? _____
1003c. Compacted areas have been cross ripped? _____
1003d. Drilling pit closed? _____ Subsidence over on drill pit? _____
Cuttings management: _____
1003e. Areas no longer needed for drilling or subsequent operations for have been re-vegetated to 80% of pre-existing? _____
Production areas have been stabilized? _____ Segregated soils have been replaced? _____

RESTORATION AND REVEGETATION

Cropland
Top soil replaced _____ Recontoured _____ Perennial forage re-established _____
Non-Cropland
Top soil replaced _____ Recontoured _____ 80% Revegetation _____

Inspector Name: LONGWORTH, MIKE

1003 f. Weeds Noxious weeds? _____

Comment: _____

Overall Interim Reclamation

Final Reclamation/ Abandoned Location:

Date Final Reclamation Started: _____ Date Final Reclamation Completed: _____

Final Land Use: _____

Reminder: _____

Comment: _____

Well plugged _____ Pit mouse/rat holes, cellars backfilled _____

Debris removed _____ No disturbance /Location never built _____

Access Roads Regraded _____ Contoured _____ Culverts removed _____

Gravel removed _____

Location and associated production facilities reclaimed _____ Locations, facilities, roads, recontoured _____

Compaction alleviation _____ Dust and erosion control _____

Non cropland: Revegetated 80% _____ Cropland: perennial forage _____

Weeds present _____ Subsidence _____

Comment: _____

Corrective Action: _____ Date _____

Overall Final Reclamation

Storm Water:

Loc Erosion BMPs	BMP Maintenance	Lease Road Erosion BMPs	Lease BMP Maintenance	Chemical BMPs	Chemical BMP Maintenance	Comment

S/U/V: _____ Corrective Date: _____

Comment: _____

CA: _____