

**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:

02/03/2012

Document Number:

659700065

Overall Inspection:

Satisfactory**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Tracking Type	Inspector Name: Baroumand, Soraya
	264836	334921		

Operator Information:OGCC Operator Number: 100185 Name of Operator: ENCANA OIL & GAS (USA) INCAddress: 370 17TH ST STE 1700City: DENVERState: COZip: 80202-**Contact Information:**

Contact Name	Phone	Email	Comment
Friesen, Kathy	(970) 285-2665	Kathy.Friesen@encana.com	Environmental Lead Piceance

Compliance Summary:QtrQtr: NWNE Sec: 10 Twp: 7S Range: 93W

Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Unsatisfactory	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
02/16/2006	200087238	PR	PR	S	I	P	N
02/15/2006	200087193	PR	PR	S	I	P	N
01/16/2004	200053543	PR	PR	S	I	P	N

Inspector Comment:**Related Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	
264836	WELL	PR	08/06/2003	OW	045-08945	HMU 10-1B (A10B)	<input checked="" type="checkbox"/>
264838	WELL	PR	08/13/2003	OW	045-08948	HMU 10-2B (A10B)	<input checked="" type="checkbox"/>
264839	WELL	PR	08/15/2003	OW	045-08949	HMU 10-2D (A10B)	<input checked="" type="checkbox"/>
264877	WELL	PR	08/02/2003	OW	045-08954	ROSE RANCH 10-8B (A10B)	<input checked="" type="checkbox"/>
265104	WELL	PR	08/15/2003	OW	045-08946	HMU 3-15D (A10B)	<input checked="" type="checkbox"/>
270892	LEASE	PR	12/26/2003	-	-	ROSE RANCH 10-8B (A10	<input type="checkbox"/>
270894	LEASE	PR	12/28/2003	-	-	HMU 10-1B (A10	<input type="checkbox"/>
270896	LEASE	PR	12/28/2003	-	-	HMU 10-1B (A10	<input type="checkbox"/>
271050	LEASE	PR	12/31/2003	-	-	HMU 10-2B (A10	<input type="checkbox"/>
271052	LEASE	PR	12/31/2003	-	-	HMU 3-15D (A10	<input type="checkbox"/>
271082	LEASE	PR	01/02/2004	-	-	HMU 10-2D (A10	<input type="checkbox"/>
334921	LOCATION	AC	04/14/2009	-	-	HMU-67S93W 10NWNE	<input type="checkbox"/>

Equipment:**Location Inventory**

Inspector Name: Baroumand, Soraya

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

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

Comment: _____

Corrective Action: _____

Spills:

Type	Area	Volume	Corrective action	CA Date
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☐ Multiple Spills and Releases?

Fencing/:

Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
WELLHEAD	Satisfactory	4' metal panels		

Equipment:

Type	#	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
Vertical Heated Separator	5	Satisfactory	Adjacent to arroyo. Very good compacted earthen berms around separator and vegetated perimeter berms. No staining observed inside separator.		

Tanks/Berms:

☐ New Tank

Tank ID: _____

Contents	#	Capacity	Type	SE GPS
PRODUCED WATER	1	300 BBLS	STEEL AST	,

S/U/V: Unsatisfactory Comment: peeling paint noted on all three tanks

Corrective Action: re-coat/re-paint tanks

Corrective Date: _____

Paint

Condition	_____
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Other (Content) _____

Other (Capacity) _____

Other (Type) _____

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance

Corrective Action _____ Corrective Date _____

Comment _____

Inspector Name: Baroumand, Soraya

Tanks/Berms:		<input type="checkbox"/> New Tank		Tank ID: _____	
Contents	#	Capacity	Type	SE GPS	
PRODUCED WATER	2	500 BBLS	STEEL AST		
S/U/V:	Unsatisfactory	Comment: peeling paint on both tanks			
Corrective Action: re-coat/re-paint tanks				Corrective Date:	05/04/2012
Paint					
Condition	Inadequate				
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					
Venting:					
Yes/No		Comment			
Flaring:					
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date	

Predrill

Location ID: 334921

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: 264836 API Number: 045-08945 Status: PR Insp. Status: PR

Facility ID: 264838 API Number: 045-08948 Status: PR Insp. Status: PR

Facility ID: 264839 API Number: 045-08949 Status: PR Insp. Status: PR

Facility ID: 264877 API Number: 045-08954 Status: PR Insp. Status: PR

Facility ID: 265104 API Number: 045-08946 Status: PR Insp. Status: PR

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:

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

Field Parameters:

Sample Location: _____

Emission Control Burner (ECB): Y _____

Comment: _____

Pilot: ON _____ Wildlife Protection Devices (fired vessels): YES _____

Reclamation - Storm Water - Pit**Interim Reclamation:**

Date Interim Reclamation Started: _____ Date Interim Reclamation Completed: _____

Land Use: _____

Comment: rangeland land type in vicinity: native grasses, broadleaf shrubs, sagebrush

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

1003b. Area no longer in use? Pass _____ Production areas stabilized ? Pass _____

1003c. Compacted areas have been cross ripped? Pass _____

1003d. Drilling pit closed? Pass _____ Subsidence over on drill pit? Pass _____

Cuttings management: _____

1003e. Areas no longer needed for drilling or subsequent operations for have been re-vegetated to 80% of pre-existing? Pass _____

Production areas have been stabilized? Pass _____ Segregated soils have been replaced? Pass _____

RESTORATION AND REVEGETATIONCropland

Top soil replaced _____ Recontoured _____ Perennial forage re-established _____

Non-Cropland

Top soil replaced Pass _____ Recontoured Pass _____ 80% Revegetation Pass _____

1003 f. Weeds Noxious weeds? P _____

Comment: Good recontour and slopes. Sustainable vegetative density of areas no longer needed meets 80%.

Inspector Name: Baroumand, Soraya

Overall Interim Reclamation Pass

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
Ditches	Pass					
Other	Pass					self-sustaining vegetation on regraded slopes
Berms	Pass					

S/U/V: Satisfactory Corrective Date: _____

Comment: _____

CA: _____