

**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:

02/21/2012

Document Number:

663600113

Overall Inspection:

Unsatisfactory**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Tracking Type	Inspector Name:
	<u>287509</u>	<u>309046</u>		<u>GINTAUTAS, PETER</u>

Operator Information:OGCC Operator Number: 10084 Name of Operator: PIONEER NATURAL RESOURCES USA INCAddress: 1401 17TH ST STE 1200City: DENVERState: COZip: 80202**Contact Information:**

Contact Name	Phone	Email	Comment
Roybal, James	719-845-4323	james.roybal@pxd.com	Construction Compliance Coordinator
Hiss, Duane		duane.hiss@pxd.com	

Compliance Summary:QtrQtr: NWSW Sec: 4 Twp: 33S Range: 66W

Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Unsatisfactory	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
01/28/2011	200293863	ES	SI	U			Y
02/05/2010	200231548	PR	PR	S			N
05/06/2007	200110008	ES	PR	S		P	N

Inspector Comment:**Related Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	
287509	WELL	SI	07/15/2010	GW	071-09018	LOBO 13-4	<input checked="" type="checkbox"/>
301120	PIT	AC	01/07/2010		-	LOBO 13-4	<input checked="" type="checkbox"/>
309046	LOCATION	AC	04/14/2009		-	LOBO-633S66W 4NWSW	<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**Signs/Marker:**

Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
BATTERY	Satisfactory			

Inspector Name: GINTAUTAS, PETER

Emergency Contact Number: <u>(S/U/V)</u> Satisfactory	Corrective Date: _____
Comment: _____	
Corrective Action: _____	

Good Housekeeping:				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
DEBRIS	Unsatisfactory	Noise Baffle shed damaged by wind?	Repair or remove pieces of sides of noise baffle building blown around location	04/05/2012

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

Fencing/:				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
PIT	Satisfactory			

Equipment:					
Type	#	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
Gas Meter Run	1	Satisfactory	meter in shed		
Vertical Separator	1	Satisfactory	in meter shed		
Progressive Cavity	1	Satisfactory	in noise baffle shed		
Prime Mover	1	Satisfactory	gas engine in noise baffle shed		

Venting:		
Yes/No	Comment	
NO		

Flaring:				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date

Predrill

Location ID: 309046

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: 287509 API Number: 071-09018 Status: SI Insp. Status: SI

Facility ID: 301120 API Number: - Status: AC Insp. Status: AC

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: _____

Sample Sample Type: SOIL COMPOSITETime: 04/21/2012 14:42 (MM/dd/yyyy hh:mm) GPS: Lat 37.198750 Long -104.789667BTEX: _____ TPH: _____ Anion: _____ Captions: _____ General Chemistry: YES

Dissolved Methane: _____ Composition: _____ Stable Isotopes: _____ 8260: _____

8270: _____ RCRA Metals: _____ 910-Metals: _____ PAH: _____

Other: soils and pine branches and needles from

Comment: _____

Sample Sample Type: SOIL COMPOSITETime: 02/21/2012 14:29 (MM/dd/yyyy hh:mm) GPS: Lat 37.198306 Long -104.789667BTEX: _____ TPH: _____ Anion: _____ Captions: _____ General Chemistry: YES

Dissolved Methane: _____ Composition: _____ Stable Isotopes: _____ 8260: _____

8270: _____ RCRA Metals: _____ 910-Metals: _____ PAH: _____

Other: pine branches and needles from stressed

Comment: _____

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 REVEGETATIONCropland

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

Non-Cropland

Top soil replaced _____ Recontoured _____ 80% Revegetation _____

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
	Fail					

S/U/V: Unsatisfactory Corrective Date: 04/13/2012

Comment: migration of fill on south side of slope of pad is occurring as interim reclamation has not resulted in adequate vegetative cover on slope and no temporary BMPs in place to prevent migration of fill material of location.

CA: Install appropriate filtering BMPs to prevent migration of fill off location until vegetative cover is adequate for interim reclamation

Pits:

Inspector Name: GINTAUTAS, PETER

Pit Type: Produced Water Lined: YES Pit ID: 301120 Lat: 37.198540 Long: -104.788800

Lining:

Liner Type: PVC Liner Condition: Adequate

Comment: _____

Fencing:

Fencing Type: Livestock Fencing Condition: Adequate

Comment: _____

Netting:

Netting Type: _____ Netting Condition: _____

Comment: _____

Anchor Trench Present: YES Oil Accumulation: NO 2+ feet Freeboard: _____

Pit (S/U/V): Satisfactory Comment: _____

Corrective Action: _____ Date: _____

Permit:	Facility ID	Permit Num	Expiration Date
	301120	1941965	
	301120	1941965	

Attached Documents

You can go to COGCC Images (<https://cogcc.state.co.us/weblink/>) and search by document number:

Document Num	Description	URL
663600114	Lobo 13-4 2011 aerial photo	http://cogcc.state.co.us/weblink/DownloadDocumentPDF.aspx?DocumentId=2876267