

**FORM INSP**  
Rev 05/11

**State of Colorado  
Oil and Gas Conservation Commission**

1120 Lincoln Street, Suite 801, Denver, Colorado 80203 Phone: (303) 894-2100 Fax: (303) 894-2109



|    |    |    |    |
|----|----|----|----|
| DE | ET | OE | ES |
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Inspection Date:  
05/18/2012

Document Number:  
663800348

Overall Inspection:  
Satisfactory

**FIELD INSPECTION FORM**

|                     |               |               |               |  |
|---------------------|---------------|---------------|---------------|--|
| Location Identifier | Facility ID   | Loc ID        | Tracking Type | Inspector Name: <u>LONGWORTH, MIKE</u> |
|                     | <u>210868</u> | <u>334847</u> |               |  |

**Operator Information:**

OGCC Operator Number: 96850 Name of Operator: WPX ENERGY ROCKY MOUNTAIN LLC  
 Address: 1001 17TH STREET - SUITE #1200  
 City: DENVER State: CO Zip: 80202

**Contact Information:**

| Contact Name | Phone          | Email                  | Comment            |
|--------------|----------------|------------------------|--------------------|
| Moss, Brad   | (970) 285-9377 | Brad.Moss@Williams.com | Production foreman |

**Compliance Summary:**

QtrQtr: NESE Sec: 11 Twp: 7S Range: 96W

| Insp. Date | Doc Num   | Insp. Type | Insp Status | Satisfactory /Unsatisfactory | PA P/F/I | Pas/Fail (P/F) | Violation (Y/N) |
|------------|-----------|------------|-------------|------------------------------|----------|----------------|-----------------|
| 03/25/2010 | 200239293 | PR         | PR          | S                            |          |                | N               |
| 10/30/2006 | 200102418 | CO         | PR          | U                            | I        | P              | Y               |
| 11/10/2000 | 200013305 | CO         | PR          | S                            |          | P              | N               |
| 03/28/1997 | 500142329 | PR         | PR          |                              |          | P              | N               |

**Inspector Comment:**

**Related Facilities:**

| Facility ID | Type | Status | Status Date | Well Class | API Num   | Facility Name    |   |
|-------------|------|--------|-------------|------------|-----------|------------------|---|
| 210868      | WELL | PR     | 12/14/1997  |            | 045-06626 | EXXON GV 3-11    | X |
| 279077      | WELL | PR     | 01/19/2006  | GW         | 045-10990 | BORUCH GM 434-11 | X |
| 279078      | WELL | PR     | 01/16/2006  | GW         | 045-10991 | BORUCH GM 433-11 | X |
| 279079      | WELL | PR     | 01/22/2006  | GW         | 045-10992 | BORUCH GM 533-11 | X |

**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**

| <b>Lease Road:</b> |                             |         |                   |      |
|--------------------|-----------------------------|---------|-------------------|------|
| Type               | Satisfactory/Unsatisfactory | comment | Corrective Action | Date |
| Access             | Satisfactory                |         |                   |      |

| <b>Signs/Marker:</b> |                             |         |                   |         |
|----------------------|-----------------------------|---------|-------------------|---------|
| Type                 | Satisfactory/Unsatisfactory | Comment | Corrective Action | CA Date |
| WELLHEAD             | Satisfactory                |         |                   |         |
| BATTERY              | Satisfactory                |         |                   |         |
| TANK LABELS/PLACARDS | Satisfactory                |         |                   |         |

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

Comment: \_\_\_\_\_

Corrective Action: \_\_\_\_\_

| <b>Good Housekeeping:</b> |                             |         |                   |         |
|---------------------------|-----------------------------|---------|-------------------|---------|
| Type                      | Satisfactory/Unsatisfactory | Comment | Corrective Action | CA Date |
| TRASH                     | Satisfactory                |         |                   |         |

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

| <b>Fencing/:</b> |                             |         |                   |         |
|------------------|-----------------------------|---------|-------------------|---------|
| Type             | Satisfactory/Unsatisfactory | Comment | Corrective Action | CA Date |
| SEPARATOR        | Satisfactory                |         |                   |         |
| WELLHEAD         | Satisfactory                |         |                   |         |
| TANK BATTERY     | Satisfactory                |         |                   |         |

| <b>Equipment:</b>           |    |                             |         |                   |         |
|-----------------------------|----|-----------------------------|---------|-------------------|---------|
| Type                        | #  | Satisfactory/Unsatisfactory | Comment | Corrective Action | CA Date |
| Plunger Lift                | 4  | Satisfactory                |         |                   |         |
| Bird Protectors             | 8  | Satisfactory                |         |                   |         |
| Horizontal Heated Separator | 10 | Satisfactory                |         |                   |         |

|                    |              |                                   |                     |                  |
|--------------------|--------------|-----------------------------------|---------------------|------------------|
| <b>Facilities:</b> |              | <input type="checkbox"/> New Tank | Tank ID: _____      |                  |
| Contents           | #            | Capacity                          | Type                | SE GPS           |
| PRODUCED WATER     | 1            | 200 BBLS                          | STEEL AST           | ,                |
| S/U/V:             | Satisfactory |                                   | Comment:            |                  |
| Corrective Action: |              |                                   |                     | Corrective Date: |
| <u>Paint</u>       |              |                                   |                     |                  |
| Condition          | Adequate     |                                   |                     |                  |
| Other (Content)    | _____        |                                   |                     |                  |
| Other (Capacity)   | _____        |                                   |                     |                  |
| Other (Type)       | _____        |                                   |                     |                  |
| <u>Berms</u>       |              |                                   |                     |                  |
| Type               | Capacity     | Permeability (Wall)               | Permeability (Base) | Maintenance      |
|                    |              |                                   |                     |                  |
| Corrective Action  |              |                                   |                     | Corrective Date  |
| Comment            |              |                                   |                     |                  |

|                    |                 |                                   |                     |                  |
|--------------------|-----------------|-----------------------------------|---------------------|------------------|
| <b>Facilities:</b> |                 | <input type="checkbox"/> New Tank | Tank ID: _____      |                  |
| Contents           | #               | Capacity                          | Type                | SE GPS           |
| CONDENSATE         | 2               | 300 BBLS                          | STEEL AST           | ,                |
| S/U/V:             | Satisfactory    |                                   | Comment:            |                  |
| Corrective Action: |                 |                                   |                     | Corrective Date: |
| <u>Paint</u>       |                 |                                   |                     |                  |
| Condition          | Adequate        |                                   |                     |                  |
| Other (Content)    | _____           |                                   |                     |                  |
| Other (Capacity)   | _____           |                                   |                     |                  |
| Other (Type)       | _____           |                                   |                     |                  |
| <u>Berms</u>       |                 |                                   |                     |                  |
| Type               | Capacity        | Permeability (Wall)               | Permeability (Base) | Maintenance      |
| Other              | Adequate        | Walls Sufficient                  | Base Sufficient     | Adequate         |
| Corrective Action  |                 |                                   |                     | Corrective Date  |
| Comment            | Fiberglass berm |                                   |                     |                  |

|                 |                      |
|-----------------|----------------------|
| <b>Venting:</b> |                      |
| Yes/No          | Comment              |
| YES             | Bradens open to vent |

|                 |                             |         |                   |         |
|-----------------|-----------------------------|---------|-------------------|---------|
| <b>Flaring:</b> |                             |         |                   |         |
| Type            | Satisfactory/Unsatisfactory | Comment | Corrective Action | CA Date |
|                 |                             |         |                   |         |

**Predrill**

Location ID: 334847

**Site Preparation:**

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

**Form 2A COAs:**

**Comment:** \_\_\_\_\_

**CA:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Wildlife BMPs:**

**Comment:** \_\_\_\_\_

**CA:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Stormwater:**

| Erosion BMPs | Present | Other BMPs | Present |
|--------------|---------|------------|---------|
|              |         |            |         |

Corrective Action: \_\_\_\_\_ Date: \_\_\_\_\_

Comments: Erosion BMPs: \_\_\_\_\_  
 Other BMPs: \_\_\_\_\_

**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:

\_\_\_\_\_

**Facility**

Facility ID: 210868 API Number: 045-06626 Status: PR Insp. Status: PR

Facility ID: 279077 API Number: 045-10990 Status: PR Insp. Status: PR

Facility ID: 279078 API Number: 045-10991 Status: PR Insp. Status: PR

Facility ID: 279079      API Number: 045-10992      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): \_\_\_\_\_  
 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 \_\_\_\_\_

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 |
|------------------|-----------------|-------------------------|-----------------------|---------------|--------------------------|---------|
| Waddles          | Pass            |                         |                       |               |                          |         |
| Ditches          | Pass            | Waddles                 | Pass                  |               |                          |         |
| Berms            | Pass            | Ditches                 | Pass                  |               |                          |         |
| Seeding          |                 |                         |                       |               |                          |         |

S/U/V: Satisfactory \_\_\_\_\_ Corrective Date: \_\_\_\_\_

Comment: Reclamation has been started

CA: \_\_\_\_\_