

**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:

08/16/2012

Document Number:

669300072

Overall Inspection:

Unsatisfactory**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Tracking Type	Inspector Name:
	<u>294557</u>	<u>336019</u>		<u>NEIDEL, KRIS</u>

Operator Information:OGCC Operator Number: 100264 Name of Operator: XTO ENERGY INCAddress: 382 CR 3100City: AZTEC State: NM Zip: 87410**Contact Information:****Compliance Summary:**QtrQtr: SENW Sec: 8 Twp: 2S Range: 97W**Inspector Comment:**

No production equipment on location. pits; liners removed and awaiting closure. wells have current MIT for TA status. location has large piles of soil everywhere, inspector walked the perimeter of location and did not see any soil migration on or off of location. Inspector considers the soil work to be ongoing interim reclamation. please provide inspector with expected completion date of interim work. wells appear to have been completed (by form 5 on file) in 2009. Location is unsatisfactory due to rule 1003.b.

Related Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	
294551	WELL	XX	12/10/2008	LO	103-11199	FREEDOM UNIT 297-8B6	<input checked="" type="checkbox"/>
294552	WELL	DG	04/13/2012	LO	103-11198	FREEDOM UNIT 297-8B1	<input checked="" type="checkbox"/>
294553	WELL	XX	12/10/2008	LO	103-11197	FREEDOM UNIT 297-8B2	<input checked="" type="checkbox"/>
294554	WELL	DG	12/10/2008	LO	103-11196	FREEDOM UNIT 297-8B3	<input checked="" type="checkbox"/>
294555	WELL	XX	12/10/2008	LO	103-11195	FREEDOM UNIT 297-8B4	<input checked="" type="checkbox"/>
294556	WELL	XX	12/10/2008	LO	103-11194	FREEDOM UNIT 297-8B5	<input checked="" type="checkbox"/>
294557	WELL	XX	12/10/2008	LO	103-11193	FREEDOM UNIT 297-8B8	<input checked="" type="checkbox"/>
294569	WELL	XX	12/10/2008	LO	103-11192	FREEDOM UNIT 297-8B9	<input checked="" type="checkbox"/>
294570	WELL	XX	12/10/2008	LO	103-11191	FREEDOM UNIT 297-8B10	<input checked="" type="checkbox"/>
294572	WELL	XX	12/10/2008	LO	103-11190	FREEDOM UNIT 297-8B7	<input checked="" type="checkbox"/>

Equipment:Location Inventory

Special Purpose Pits: _____	Drilling Pits: _____	Wells: _____	Production Pits: _____
Condensate Tanks: _____	Water Tanks: _____	Separators: _____	Electric Motors: _____
Gas or Diesel Motors: _____	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	entrance to location		

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

Comment: _____

Corrective Action: _____

Good Housekeeping:				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
TRASH	Satisfactory	clean		

Spills:				
Type	Area	Volume	Corrective action	CA Date

☐ Multiple Spills and Releases?

Fencing/:				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
LOCATION	Satisfactory			
WELLHEAD	Satisfactory	horse pen around wellheads.		

Venting:		
Yes/No	Comment	
NO	all wells shut in.	

Flaring:				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date

Predrill

Location ID: 336019

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: 294551 Type: WELL API Number: 103-11199 Status: XX Insp. Status: WO

Facility ID: 294552 Type: WELL API Number: 103-11198 Status: DG Insp. Status: WO

Facility ID: 294553 Type: WELL API Number: 103-11197 Status: XX Insp. Status: WO

Inspector Name: NEIDEL, KRIS

Facility ID:	294554	Type:	WELL	API Number:	103-11196	Status:	DG	Insp. Status:	WO
Facility ID:	294555	Type:	WELL	API Number:	103-11195	Status:	XX	Insp. Status:	WO
Facility ID:	294556	Type:	WELL	API Number:	103-11194	Status:	XX	Insp. Status:	WO
Facility ID:	294557	Type:	WELL	API Number:	103-11193	Status:	XX	Insp. Status:	WO
Facility ID:	294569	Type:	WELL	API Number:	103-11192	Status:	XX	Insp. Status:	WO
Facility ID:	294570	Type:	WELL	API Number:	103-11191	Status:	XX	Insp. Status:	WO
Facility ID:	294572	Type:	WELL	API Number:	103-11190	Status:	XX	Insp. Status:	WO

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? 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? Fail CM continue pit clousureCA on going work.CA Date 11/01/2012Guy line anchors removed? Pass CM _____

CA _____ CA Date _____

Guy line anchors marked? _____ CM _____

CA _____ CA Date _____

1003b. Area no longer in use? FailProduction areas stabilized ? Fail

1003c. Compacted areas have been cross ripped? _____

1003d. Drilling pit closed? FailSubsidence over on drill pit? Fail

Cuttings management: _____

1003e. Areas no longer needed for drilling or subsequent operations for have been re-vegetated to 80% of pre-existing? FailProduction areas have been stabilized? FailSegregated soils have been replaced? Fail**RESTORATION AND REVEGETATION**Cropland

Top soil replaced _____

Recontoured _____

Perennial forage re-established _____

Non-CroplandTop soil replaced FailRecontoured Fail80% Revegetation Fail1003 f. Weeds Noxious weeds? P

Comment: _____

Overall Interim Reclamation Fail**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

Multi-Well Location ☐**Storm Water:**

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

Inspector Name: NEIDEL, KRIS

Berms	Pass	Gravel	Pass			
Ditches	Pass					
Slope Roughening	Pass	Culverts	Pass			
Sediment Traps	Pass					

S/U/V: Satisfactory Corrective Date: _____

Comment: even though the entire location is disturbed soil, none is moving off of location. BMP's are working.

CA: _____

COGCC Comments

Comment	User	Date
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