

Inspector Name: HICKEY, MIKE

**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:

10/09/2012

Document Number:

667600874

Overall Inspection:

Satisfactory**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Tracking Type	Inspector Name:
	<u>244835</u>	<u>323151</u>		<u>HICKEY, MIKE</u>

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
Berlin, John		john.berlin@encana.com	

Compliance Summary:QtrQtr: SENE Sec: 22 Twp: 1N Range: 68W

Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Unsatisfactory	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
06/12/2007	200124001	PR	PR	U			Y
02/01/2005	200065891	PR	PR	S		P	N
05/06/1999	500168905	PR	PR			P	N
10/22/1997	500168904	PR	PR			P	N
05/30/1996	500168903	PR	PR				

Inspector Comment:

Follow up inspection of API #05-123-12630, Cosslett B Unit #1X. Previous unsatisfactory inspection dated 6/12/2007 identified wellhead leaks and oil stained soils requiring repair and clean up as well as the need for signage and bird protectors. These deficiencies have been adequately addressed with the inclusion of additional new wells and the reconstruction of the location.

Related Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	
244835	WELL	PR	11/03/2009	OG	123-12630	COSSLETT B UNIT 1X	X
420750	WELL	PR	05/29/2012	GW	123-32702	COSSLETT 8-2-22	X
420754	WELL	PR	04/18/2012		123-32703	COSSLETT 42-22	X
420757	WELL	PR	07/17/2012	GW	123-32704	COSSLETT 6-0-22	X
420759	WELL	PR	05/29/2012	GW	123-32705	COSSLETT 41-22	X
420763	WELL	PR	06/12/2012		123-32706	COSSLETT 4-0-22	X
420875	WELL	PR	05/29/2012	GW	123-32731	COSSLETT 32-22	X
420884	WELL	PR	05/29/2012	GW	123-32736	COSSLETT 6-4-22	X

Equipment:Location Inventory

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Special Purpose Pits: _____	Drilling Pits: _____	Wells: <u>8</u>	Production Pits: _____
Condensate Tanks: _____	Water Tanks: <u>1</u>	Separators: <u>4</u>	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: <u>4</u>	Dehydrator Units: _____
Multi-Well Pits: _____	Pigging Station: _____	Flare: _____	Fuel Tanks: _____

Location

Signs/Marker:

Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
WELLHEAD	Satisfactory	X7		
BATTERY	Satisfactory	X7		
TANK LABELS/PLACARDS	Satisfactory			

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
IGNITOR/COMBUST OR	Satisfactory			
TANK BATTERY	Satisfactory			
OTHER	Satisfactory	Gas meter shed		
SEPARATOR	Satisfactory			
WELLHEAD	Satisfactory	X7		

Equipment:

Type	#	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
Plunger Lift	8	Satisfactory			
Horizontal Heated Separator	4	Satisfactory			
Bird Protectors	6	Satisfactory			
Emission Control Device	2	Satisfactory			
Gas Meter Run	1	Satisfactory			

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Facilities:		<input type="checkbox"/> New Tank		Tank ID: _____	
Contents	#	Capacity	Type	SE GPS	
PRODUCED WATER	1	OTHER	PBV FIBERGLASS		
S/U/V:	Satisfactory		Comment:		
Corrective Action:					Corrective Date:
<u>Paint</u>					
Condition	Adequate				
Other (Content) _____					
Other (Capacity) 230 Bbl. _____					
Other (Type) _____					
<u>Berms</u>					
Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance	
Corrective Action					Corrective Date
Comment					
Facilities:		<input type="checkbox"/> New Tank		Tank ID: _____	
Contents	#	Capacity	Type	SE GPS	
CONDENSATE	4	OTHER	STEEL AST	40.040100,104.983380	
S/U/V:	Satisfactory		Comment:		
Corrective Action:					Corrective Date:
<u>Paint</u>					
Condition	Adequate				
Other (Content) _____					
Other (Capacity) 330 Bbl. _____					
Other (Type) _____					
<u>Berms</u>					
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	
Ignitor/Combustor	Satisfactory				

Predrill

Location ID: 323151

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: 244835 Type: WELL API Number: 123-12630 Status: PR Insp. Status: PR

Producing Well**Comment:**

Facility ID: 420750 Type: WELL API Number: 123-32702 Status: PR Insp. Status: PR

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Producing Well

Comment: _____

Facility ID: 420754 Type: WELL API Number: 123-32703 Status: PR Insp. Status: PR

Producing Well

Comment: _____

Facility ID: 420757 Type: WELL API Number: 123-32704 Status: PR Insp. Status: PR

Producing Well

Comment: _____

Facility ID: 420759 Type: WELL API Number: 123-32705 Status: PR Insp. Status: PR

Producing Well

Comment: _____

Facility ID: 420763 Type: WELL API Number: 123-32706 Status: PR Insp. Status: PR

Producing Well

Comment: _____

Facility ID: 420875 Type: WELL API Number: 123-32731 Status: PR Insp. Status: PR

Producing Well

Comment: _____

Facility ID: 420884 Type: WELL API Number: 123-32736 Status: PR Insp. Status: PR

Producing Well

Comment: _____

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: DRY LAND

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? _____ 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? Pass Production areas stabilized ? Pass1003c. Compacted areas have been cross ripped? Pass

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? PassProduction areas have been stabilized? Pass Segregated soils have been replaced? Pass**RESTORATION AND REVEGETATION**CroplandTop soil replaced Pass Recontoured Pass Perennial forage re-established PassNon-Cropland

Top soil replaced _____ Recontoured _____ 80% Revegetation _____

1003 f. Weeds Noxious weeds? P

Comment: _____

Overall Interim Reclamation Pass**Final Reclamation/ Abandoned Location:**

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

Final Land Use: DRY LAND

Reminder: _____

Comment: _____

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

Debris removed _____ No disturbance /Location never built _____

Access Roads Regraded _____ Contoured _____ Culverts removed _____

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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
Seeding	Pass	Gravel	Pass			

S/U/V: Satisfactory _____ Corrective Date: _____

Comment: _____

CA: _____