

**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:

10/16/2012

Document Number:

667600896

Overall Inspection:

Satisfactory**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Tracking Type	Inspector Name:
	415294	415299		HICKEY, MIKE

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: NWSE Sec: 13 Twp: 1N Range: 69W

Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Unsatisfactory	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
06/04/2012	665400275	XX	XX	S			N
05/31/2012	665400274	XX	XX	S			N

Inspector Comment:

Sound check at the request of the operator. Wind speed in excess of 5mph does not allow accurate reading. Return trip will be scheduled.

Related Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	
415294	WELL	DG	06/05/2012		013-06627	CANYON CREEK 4-6-13	<input checked="" type="checkbox"/>
415296	WELL	DG	07/02/2012		013-06628	CANYON CREEK 8-6-13	<input checked="" type="checkbox"/>
415297	WELL	DG	06/22/2012		013-06629	CANYON CREEK 44-13	<input checked="" type="checkbox"/>
415303	WELL	DG	06/16/2012		013-06630	CANYON CREEK 33-13	<input checked="" type="checkbox"/>
415309	WELL	DG	06/11/2012		013-06631	CANYON CREEK 34-13	<input checked="" type="checkbox"/>
415313	WELL	DG	06/27/2012		013-06632	CANYON CREEK 43-13	<input checked="" type="checkbox"/>
416934	WELL	DG	07/04/2012		013-06633	CANYON CREEK 8-6-13 X	<input checked="" type="checkbox"/>
417051	WELL	DG	07/09/2012		013-06634	CANYON CREEK 4-8-13	<input checked="" type="checkbox"/>
429576	WELL	DG	07/14/2012		013-06667	CANYON CREEK 4-13	<input checked="" type="checkbox"/>

Equipment:**Location Inventory**

Special Purpose Pits: _____	Drilling Pits: <u>1</u>	Wells: <u>8</u>	Production Pits: _____
Condensate Tanks: <u>2</u>	Water Tanks: <u>1</u>	Separators: <u>4</u>	Electric Motors: _____
Gas or Diesel Motors: _____	Cavity Pumps: _____	LACT Unit: _____	Pump Jacks: _____
Electric Generators: _____	Gas Pipeline: <u>1</u>	Oil Pipeline: _____	Water Pipeline: _____
Gas Compressors: _____	VOC Combustor: _____	Oil Tanks: _____	Dehydrator Units: _____
Multi-Well Pits: _____	Pigging Station: _____	Flare: _____	Fuel Tanks: _____

Location

Inspector Name: HICKEY, MIKE

Emergency Contact Number: (S/U/V) _____

Corrective Date: _____

Comment: _____

Corrective Action: _____

Spills:

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

Venting:

Yes/No

Comment

Flaring:

Type

Satisfactory/Unsatisfactory

Comment

Corrective Action

CA Date

Predrill

Location ID: 415299

Site Preparation:

Lease Road Adeq.: _____

Pads: _____

Soil Stockpile: _____

Corrective Action: _____

Date: _____ CDP Num.: _____

Form 2A COAs:

Group	User	Comment	Date
Agency	youngrr	Location may be in a sensitive area due to shallow groundwater; therefore if drilling pits intercept groundwater the pit must be lined or a closed loop system used.	01/19/2010
Agency	walkerv	Location may be in a sensitive area due to shallow groundwater; therefore if drilling pits intercept groundwater the pit must be lined or a closed loop system used	04/12/2010

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: 415294 Type: WELL API Number: 013-06627 Status: DG Insp. Status: PR

Inspector Name: HICKEY, MIKE

Producing Well

Comment:

Facility ID: 415296 Type: WELL API Number: 013-06628 Status: DG Insp. Status: PR

Producing Well

Comment:

Facility ID: 415297 Type: WELL API Number: 013-06629 Status: DG Insp. Status: PR

Producing Well

Comment:

Facility ID: 415303 Type: WELL API Number: 013-06630 Status: DG Insp. Status: PR

Producing Well

Comment:

Facility ID: 415309 Type: WELL API Number: 013-06631 Status: DG Insp. Status: PR

Producing Well

Comment:

Facility ID: 415313 Type: WELL API Number: 013-06632 Status: DG Insp. Status: PR

Producing Well

Comment:

Facility ID: 416934 Type: WELL API Number: 013-06633 Status: DG Insp. Status: PR

Producing Well

Comment:

Facility ID: 417051 Type: WELL API Number: 013-06634 Status: DG Insp. Status: PR

Producing Well

Comment:

Facility ID: 429576 Type: WELL API Number: 013-06667 Status: DG 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:

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

Field Parameters:

Sample Location: _____

Complaint:

Tracking Num	Category	Assigned To	Description	Incident Date
200362631	ODOR	HICKEY, MIKE	Ms. Janet Bravik called on Sept. 11, 2012 at 14:45. She said that there was a burning chemical odor on Aug 4, 2012, Sept 11, 2012 at 02:45 in the a.m.. The odor was stil prevalent at 13:48. She said that she is located 1.4 mile fro the Canyon Creek Well pad (Encana)where fracing operations maybe occuring.	09/12/2012

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? _____ 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

Inspector Name: HICKEY, MIKE

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: 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 _____

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

S/U/V: _____

Corrective Date: _____

Comment: _____

CA: _____