

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



| | | | |
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| DE | ET | OE | ES |
|----|----|----|----|

Inspection Date:
11/14/2012

Document Number:
663800581

Overall Inspection:
Satisfactory

FIELD INSPECTION FORM

| | | | | |
|---------------------|---------------|---------------|---------------|--|
| Location Identifier | Facility ID | Loc ID | Tracking Type | Inspector Name: <u>LONGWORTH, MIKE</u> |
| | <u>300824</u> | <u>334873</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@wpxenergy.com | Production foreman |

Compliance Summary:

QtrQtr: SWSW Sec: 35 Twp: 6S Range: 94W

Inspector Comment:

Inspection prompted by near by odor complaint. No odors were noticed at time of inspection.

Related Facilities:

| Facility ID | Type | Status | Status Date | Well Class | API Num | Facility Name | |
|-------------|------|--------|-------------|------------|-----------|-------------------|-------------------------------------|
| 211318 | WELL | PR | 11/03/1996 | GW | 045-07078 | SAVAGE RMV 48-35 | <input checked="" type="checkbox"/> |
| 300824 | WELL | PR | 08/31/2010 | GW | 045-18029 | SAVAGE RWF 13-35 | <input checked="" type="checkbox"/> |
| 300825 | WELL | PR | 05/03/2011 | GW | 045-18030 | SAVAGE RWF 513-35 | <input checked="" type="checkbox"/> |
| 300826 | WELL | PR | 03/11/2011 | LO | 045-18031 | savage RWF 424-35 | <input checked="" type="checkbox"/> |
| 300827 | WELL | PR | 03/11/2011 | LO | 045-18032 | SAVAGE RMV 69-35 | <input checked="" type="checkbox"/> |
| 300828 | WELL | PR | 03/11/2011 | LO | 045-18033 | SAVAGE RWF 324-35 | <input checked="" type="checkbox"/> |
| 300829 | WELL | PR | 03/11/2011 | LO | 045-18034 | SAVAGE RWF 423-35 | <input checked="" type="checkbox"/> |
| 300830 | WELL | PR | 03/11/2011 | LO | 045-18035 | SAVAGE RWF 414-35 | <input checked="" type="checkbox"/> |
| 300831 | WELL | PR | 08/31/2010 | GW | 045-18036 | SAVAGE RWF 314-35 | <input checked="" type="checkbox"/> |
| 300832 | WELL | PR | 01/01/2012 | GW | 045-18037 | SAVAGE RWF 14-35 | <input checked="" type="checkbox"/> |
| 422636 | PIT | CL | 04/06/2011 | | - | RMV 48-35 | |

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

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

| Signs/Marker: | | | | |
|----------------------|-----------------------------|-----------------------------------|-------------------|---------|
| Type | Satisfactory/Unsatisfactory | Comment | Corrective Action | CA Date |
| WELLHEAD | Satisfactory | | | |
| TANK LABELS/PLACARDS | Satisfactory | | | |
| BATTERY | Satisfactory | | | |
| CONTAINERS | Satisfactory | 2 totes of flowguard at wellheads | | |

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

Comment: _____

Corrective Action: _____

| Good Housekeeping: | | | | |
|---------------------------|-----------------------------|--|------------------------|------------|
| Type | Satisfactory/Unsatisfactory | Comment | Corrective Action | CA Date |
| WEEDS | Unsatisfactory | Weed control needed along access road and in reclaim area. | CCut and control weeds | 12/07/2012 |
| TRASH | Satisfactory | | | |

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

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

| Equipment: | | | | | |
|-----------------------------|----|-----------------------------|------------|------------------------|------------|
| Type | # | Satisfactory/Unsatisfactory | Comment | Corrective Action | CA Date |
| Deadman # & Marked | 12 | Unsatisfactory | 8 unmarked | Mark or remove deadmen | 12/07/2012 |
| Horizontal Heated Separator | 10 | Satisfactory | | | |
| Plunger Lift | 10 | Satisfactory | | | |
| Bird Protectors | 6 | Satisfactory | | | |

| | | | | |
|--------------------|--------------|-----------------------------------|---------------------|----------------------|
| Facilities: | | <input type="checkbox"/> New Tank | Tank ID: _____ | |
| Contents | # | Capacity | Type | SE GPS |
| PRODUCED WATER | 2 | 300 BBLS | STEEL AST | 39.475730,107.863270 |
| 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 |
| Metal | Adequate | Walls Sufficient | Base Sufficient | Adequate |
| Corrective Action | | | | Corrective Date |
| Comment | | | | |

| | | | | |
|--------------------|--------------|-----------------------------------|---------------------|------------------|
| Facilities: | | <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 |
| | | | | |
| Corrective Action | | | | Corrective Date |
| Comment | | | | |

| | |
|-----------------|-------------------------|
| Venting: | |
| Yes/No | Comment |
| YES | braden are open to vent |

| | | | | |
|-------------------|-----------------------------|---------|-------------------|---------|
| Flaring: | | | | |
| Type | Satisfactory/Unsatisfactory | Comment | Corrective Action | CA Date |
| Ignitor/Combustor | Satisfactory | | | |

Predrill

Location ID: 334873

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: 211318 Type: WELL API Number: 045-07078 Status: PR Insp. Status: PR

Producing Well

Comment: Odor complanant from near by home owner.

Complaint

Comment: _____

Facility ID: 300824 Type: WELL API Number: 045-18029 Status: PR Insp. Status: PR

Producing Well

Comment:

Complaint

Comment:

Facility ID: 300825 Type: WELL API Number: 045-18030 Status: PR Insp. Status: PR

Producing Well

Comment:

Complaint

Comment:

Facility ID: 300826 Type: WELL API Number: 045-18031 Status: PR Insp. Status: PR

Producing Well

Comment:

Complaint

Comment:

Facility ID: 300827 Type: WELL API Number: 045-18032 Status: PR Insp. Status: PR

Producing Well

Comment:

Complaint

Comment:

Facility ID: 300828 Type: WELL API Number: 045-18033 Status: PR Insp. Status: PR

Producing Well

Comment:

Complaint

Comment:

Facility ID: 300829 Type: WELL API Number: 045-18034 Status: PR Insp. Status: PR

Producing Well

Comment:

Complaint

Comment:

Facility ID: 300830 Type: WELL API Number: 045-18035 Status: PR Insp. Status: PR

Producing Well

Comment:

Complaint

Comment:

Facility ID: 300831 Type: WELL API Number: 045-18036 Status: PR Insp. Status: PR

Producing Well

Comment:

Complaint

Comment:

Facility ID: 300832 Type: WELL API Number: 045-18037 Status: PR Insp. Status: PR

Producing Well

Comment:

Complaint

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: _____

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? Pass CM _____

CA _____ CA Date _____

Guy line anchors removed? Fail CM _____

CA CA Date

Guy line anchors marked? Fail CM _____

CA Mark or remove anchors

CA Date 12/07/2012

1003b. Area no longer in use? In Production areas stabilized? Pass

1003c. Compacted areas have been cross ripped? Pass

1003d. Drilling pit closed? Pass 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? In

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? I

Comment: _____

Overall Interim Reclamation In Process

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 | Gravel | Pass | | | |
| Gravel | Pass | Ditches | Pass | | | |
| Drains | Pass | Culverts | Pass | | | |
| Compaction | Pass | Compaction | Pass | | | |
| Berms | Pass | Berms | Pass | | | |

Inspector Name: LONGWORTH, MIKE

S/U/V: Satisfactory Corrective Date: _____

Comment: _____

CA: _____

| Permit: | Facility ID | Permit Num | Expiration Date |
|---------|-------------|------------|-----------------|
| | 422636 | 2213253 | |

COGCC Comments

| Comment | User | Date |
|---|----------|------------|
| Inspection prompted by near by odor complaint. No odors were noticed at time of inspection. | longworm | 11/14/2012 |