

<b>FORM INSP</b> Rev 05/11	<b>State of Colorado</b> <b>Oil and Gas Conservation Commission</b> 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:  
11/23/2012

Document Number:  
663800600

Overall Inspection:  
Satisfactory

**FIELD INSPECTION FORM**

Location Identifier	Facility ID <u>290562</u>	Loc ID <u>334748</u>	Tracking Type	Inspector Name: <u>LONGWORTH, MIKE</u>
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**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: NESW Sec: 32 Twp: 6S Range: 94W

Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Unsatisfactory	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
03/03/2010	200235908	PR	PR	S			N
01/09/2009	200202336	PR	PR	U			Y
12/19/2008	200201662	PR	PR	S			N
10/08/2008	200202795	CO	PR	S			N

**Inspector Comment:**

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**Related Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	
290549	WELL	PR	02/16/2011	GW	045-14153	WELLS RWF 24-32	X
290550	WELL	PR	09/28/2008	GW	045-14152	WELLS RWF 424-32	X
290551	WELL	PR	09/30/2008	GW	045-14151	WELLS RWF 524-32	X
290552	WELL	PR	05/11/2007	GW	045-14150	WELLS RWF 413-32	X
290553	WELL	PR	05/11/2007	GW	045-14149	WELLS RWF 313-32	X
290554	WELL	PR	05/11/2007	GW	045-14148	WELLS RWF 513-32	X
290555	WELL	PR	05/11/2007	GW	045-14147	WELLS RWF 14-32	X
290556	WELL	PR	05/11/2007	GW	045-14146	WELLS RWF 314-32	X
290557	WELL	PR	01/31/2008	GW	045-14145	WELLS RWF 414-32	X
290558	WELL	PR	05/11/2007	GW	045-14144	WELLS RWF 323-32	X
290559	WELL	PR	05/11/2007	GW	045-14143	WELLS RWF 23-32	X
290560	WELL	PR	06/30/2008	GW	045-14142	WELLS RWF 523-32	X
290561	WELL	PR	09/30/2008	GW	045-14141	WELLS RWF 423-32	X
290562	WELL	PR	10/19/2008	GW	045-14140	WELLS RWF 324-32	X
292165	WELL	PR	09/06/2007	GW	045-14611	WELLS RWF 13-32	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
TANK LABELS/PLACARDS	Satisfactory			
CONTAINERS	Satisfactory			
BATTERY	Satisfactory			
WELLHEAD	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
WELLHEAD	Satisfactory			
TANK BATTERY	Satisfactory			
SEPARATOR	Satisfactory			

<b>Equipment:</b>					
Type	#	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
Plunger Lift	15	Satisfactory			
Bird Protectors	9	Satisfactory			
Deadman # & Marked	1	Unsatisfactory		Mark or remove deadman	12/31/2012
Horizontal Heated Separator	15	Satisfactory	3 quads 1 double 1 single		

<b>Facilities:</b>		<input type="checkbox"/> New Tank	Tank ID: _____	
Contents	#	Capacity	Type	SE GPS
PRODUCED WATER	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				

<b>Facilities:</b>		<input type="checkbox"/> New Tank	Tank ID: _____	
Contents	#	Capacity	Type	SE GPS
CONDENSATE	3	300 BBLS	STEEL AST	39.480400,107.911730
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				

<b>Venting:</b>	
Yes/No	Comment
YES	Bradens venting

<b>Flaring:</b>				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
Ignitor/Combustor	Satisfactory			

**Predrill**

Location ID: 334748

**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: 290549 Type: WELL API Number: 045-14153 Status: PR Insp. Status: PR

**Producing Well**

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

Facility ID: 290550 Type: WELL API Number: 045-14152 Status: PR Insp. Status: PR

<b>Producing Well</b>									
Comment: <input type="text"/>									
Facility ID:	290551	Type:	WELL	API Number:	045-14151	Status:	PR	Insp. Status:	PR
<b>Producing Well</b>									
Comment: <input type="text"/>									
Facility ID:	290552	Type:	WELL	API Number:	045-14150	Status:	PR	Insp. Status:	PR
<b>Producing Well</b>									
Comment: <input type="text"/>									
Facility ID:	290553	Type:	WELL	API Number:	045-14149	Status:	PR	Insp. Status:	PR
<b>Producing Well</b>									
Comment: <input type="text"/>									
Facility ID:	290554	Type:	WELL	API Number:	045-14148	Status:	PR	Insp. Status:	PR
<b>Producing Well</b>									
Comment: <input type="text"/>									
Facility ID:	290555	Type:	WELL	API Number:	045-14147	Status:	PR	Insp. Status:	PR
<b>Producing Well</b>									
Comment: <input type="text"/>									
Facility ID:	290556	Type:	WELL	API Number:	045-14146	Status:	PR	Insp. Status:	PR
<b>Producing Well</b>									
Comment: <input type="text"/>									
Facility ID:	290557	Type:	WELL	API Number:	045-14145	Status:	PR	Insp. Status:	PR
<b>Producing Well</b>									
Comment: <input type="text"/>									
Facility ID:	290558	Type:	WELL	API Number:	045-14144	Status:	PR	Insp. Status:	PR
<b>Producing Well</b>									
Comment: <input type="text"/>									
Facility ID:	290559	Type:	WELL	API Number:	045-14143	Status:	PR	Insp. Status:	PR
<b>Producing Well</b>									
Comment: <input type="text"/>									
Facility ID:	290560	Type:	WELL	API Number:	045-14142	Status:	PR	Insp. Status:	PR
<b>Producing Well</b>									
Comment: <input type="text"/>									
Facility ID:	290561	Type:	WELL	API Number:	045-14141	Status:	PR	Insp. Status:	PR
<b>Producing Well</b>									
Comment: <input type="text"/>									

Facility ID: 290562 Type: WELL API Number: 045-14140 Status: PR Insp. Status: PR

**Producing Well**

Comment:

Facility ID: 292165 Type: WELL API Number: 045-14611 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:**

DWR Receipt Num: \_\_\_\_\_ Owner Name: \_\_\_\_\_ GPS: \_\_\_\_\_ Lat \_\_\_\_\_ Long \_\_\_\_\_

**Field Parameters:**

Sample Location:

**Complaint:**

Tracking Num	Category	Assigned To	Description	Incident Date
200128239	DUST	KELLERBY, SHAUN	Dust coming from traffic on CR 309 in Garfield County	03/18/2008

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 Mark or remove CA Date 12/31/2012  
 Guy line anchors marked? \_\_\_\_\_ CM \_\_\_\_\_  
 CA \_\_\_\_\_ CA Date \_\_\_\_\_

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? \_\_\_\_\_  
 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? P

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

<b>Storm Water:</b>						
Loc Erosion BMPs	BMP Maintenance	Lease Road Erosion BMPs	Lease BMP Maintenance	Chemical BMPs	Chemical BMP Maintenance	Comment
Berms	Pass	Berms				
Gravel	Pass	Gravel				
Compaction	Pass	Compaction				

Inspector Name: LONGWORTH, MIKE

Ditches	Pass	Ditches				
S/U/V: Satisfactory		Corrective Date: _____				
Comment: _____						
CA: _____						