

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



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Inspection Date:

03/08/2013

Document Number:

667601186

Overall Inspection:

Satisfactory**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	<u>430280</u>	<u>430283</u>	<u>HICKEY, MIKE</u>	<input type="checkbox"/>	

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: NWNE Sec: 2 Twp: 2N Range: 66W**Inspector Comment:**

First time inspection of API #05-123-36111, lone #1A-2H et al multi-well location. Drilling has been recently completed. Wellheads are in place, and site construction is underway. WO Completion.

Related Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	
430278	WELL	DG	02/15/2013	LO	123-36109	IONE 1E-2H	<input checked="" type="checkbox"/>
430279	WELL	DG	02/15/2013	LO	123-36110	IONE 1B-2H	<input checked="" type="checkbox"/>
430280	WELL	DG	02/15/2013	LO	123-36111	IONE 1A-2H	<input checked="" type="checkbox"/>
430281	WELL	DG	02/15/2013	LO	123-36112	IONE 1D-2H	<input checked="" type="checkbox"/>
430282	WELL	DG	02/15/2013	LO	123-36113	IONE 1C-2H	<input checked="" type="checkbox"/>
430348	WELL	DG	02/15/2013	LO	123-36135	IONE 1F-2H	<input checked="" type="checkbox"/>

Equipment:Location Inventory

Special Purpose Pits: _____	Drilling Pits: _____	Wells: <u>6</u>	Production Pits: _____
Condensate Tanks: <u>30</u>	Water Tanks: <u>12</u>	Separators: <u>6</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: <u>12</u>	Oil Tanks: _____	Dehydrator Units: _____
Multi-Well Pits: _____	Pigging Station: _____	Flare: _____	Fuel Tanks: _____

Location**Signs/Marker:**

Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
WELLHEAD	Satisfactory	Location construction is under way		

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

Corrective Date: _____

Inspector Name: HICKEY, MIKE

Comment: Encana personnel on location

Corrective Action:

Spills:

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

Venting:

Yes/No	Comment
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NO

Flaring:

Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
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Predrill

Location ID: 430283

Site Preparation:

Lease Road Adeq.: _____

Pads: _____

Soil Stockpile: _____

Corrective Action: _____

Date: _____ CDP Num.: _____

Form 2A COAs:

Group	User	Comment	Date
OGLA	deranleg	Tank batteries shall be constructed with a synthetic or clay liner to prevent spilled or leaked fluids from infiltrating.	09/17/2012

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: 430278 Type: WELL API Number: 123-36109 Status: DG Insp. Status: WO

Idle Well

Purpose: ☒ Shut In ☐ Temporarily Abandoned Reminder: _____
S/V: Satisfactory CA Date: _____
CA: _____
Comment: WO Completion

Facility ID: 430279 Type: WELL API Number: 123-36110 Status: DG Insp. Status: WO

Idle Well

Purpose: ☐ Shut In ☐ Temporarily Abandoned Reminder: _____
S/V: Satisfactory CA Date: _____
CA: _____
Comment: WO Completion

Facility ID: 430280 Type: WELL API Number: 123-36111 Status: DG Insp. Status: WO

Idle Well

Purpose: ☒ Shut In ☐ Temporarily Abandoned Reminder: _____
S/V: CA Date: _____
CA: _____
Comment: WO Completion

Facility ID: 430281 Type: WELL API Number: 123-36112 Status: DG Insp. Status: WO

Idle Well

Purpose: ☐ Shut In ☐ Temporarily Abandoned Reminder: _____
S/V: CA Date: _____
CA: _____
Comment: WO Completion

Facility ID: 430282 Type: WELL API Number: 123-36113 Status: DG Insp. Status: WO

Idle Well

Purpose: ☒ Shut In ☐ Temporarily Abandoned Reminder: _____
S/V: CA Date: _____
CA: _____
Comment: WO Completion

Facility ID: 430348 Type: WELL API Number: 123-36135 Status: DG Insp. Status: WO

Idle Well

Purpose: ☐ Shut In ☐ Temporarily Abandoned Reminder: _____
S/V: CA Date: _____
CA: _____
Comment: WO Completion

Environmental**Spills/Releases:**

Type of Spill: _____ Description: _____ Estimated Spill Volume: _____

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Comment: <input style="width: 700px;" type="text"/>			
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:			
<input style="width: 300px;" type="text"/>			
Sample Location: <input style="width: 400px;" type="text"/>			
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: RANGELAND			
Comment: <input style="width: 750px;" type="text"/>			
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 REVEGETATION			
<u>Cropland</u>			
	Top soil replaced _____	Recontoured _____	Perennial forage re-established _____

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Non-Cropland

Top soil replaced _____

Recontoured _____ In _____

80% Revegetation _____

1003 f. Weeds Noxious weeds? _____ P _____

Comment: Earth moving operations are under way.

Overall Interim Reclamation _____ In Process _____

Final Reclamation/ Abandoned Location:

Date Final Reclamation Started: _____

Date Final Reclamation Completed: _____

Final Land Use: RANGELAND _____

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
Compaction	Pass	Gravel	Pass			

S/U/V: Satisfactory _____

Corrective Date: _____

Comment: _____

CA: _____