

**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:

05/28/2013

Document Number:

670200501

Overall Inspection:

Satisfactory**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	285597	334679	BURGER, CRAIG	<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
Kellerby, Shaun		Shaun.Kellerby@state.co.us	NW Field Supervisor
Inspections, General		cogcc.inspections@encana.com	

Compliance Summary:QtrQtr: SENE Sec: 23 Twp: 7S Range: 93W

Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Unsatisfactory	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
05/27/2011	200312043	SR	PR	S			N
01/30/2009	200203437	PR	PR	U			Y

Inspector Comment:**Related Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	
285591	WELL	PR	07/12/2007	GW	045-12529	COUEY 23-16B (H23W)	<input checked="" type="checkbox"/>
285592	WELL	PR	06/30/2007	GW	045-12528	COUEY 23-9 (H23W)	<input checked="" type="checkbox"/>
285593	WELL	PR	07/07/2007	GW	045-12527	COUEY 23-8C (H23W)	<input checked="" type="checkbox"/>
285597	WELL	PR	07/10/2007	GW	045-12526	COUEY FEDERAL 23-10 (H23W)	<input checked="" type="checkbox"/>
292240	WELL	PR	05/07/2013	GW	045-14657	COUEY 23-8 (H23W)	<input checked="" type="checkbox"/>
292241	WELL	PR	04/20/2008	GW	045-14656	COUEY 24-5 (H23W)	<input checked="" type="checkbox"/>
292242	WELL	PR	05/04/2008	GW	045-14655	COUEY 24-5C (H23W)	<input checked="" type="checkbox"/>
292243	WELL	PR	04/08/2008	GW	045-14654	COUEY 24-12 (H23W)	<input checked="" type="checkbox"/>
292262	WELL	PR	04/23/2008	GW	045-14658	COUEY 24-4D (H23W)	<input checked="" type="checkbox"/>

Equipment:**Location Inventory**

Inspector Name: BURGER, CRAIG

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

Signs/Marker:				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
TANK LABELS/PLACARDS	Satisfactory			
BATTERY	Satisfactory			
WELLHEAD	Unsatisfactory	Signs need 1/4 1/4 section.	Install sign to comply with rule 210.d.	06/28/2013

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

Comment: _____

Corrective Action: _____

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

Fencing/:				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
LOCATION	Satisfactory	barbed wire		

Equipment:					
Type	#	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
Bird Protectors	6	Satisfactory			
Horizontal Heated Separator	9	Satisfactory	No containment.		
Plunger Lift	9	Satisfactory			
Pig Station	1	Satisfactory			
Gathering Line	1	Satisfactory			
Emission Control Device	1	Satisfactory			
Deadman # & Marked	3	Satisfactory	some markers down		
Gas Meter Run	1	Satisfactory			

Facilities:		<input type="checkbox"/> New Tank		Tank ID: _____	
Contents	#	Capacity	Type	SE GPS	
METHANOL	1	1000 GAL	STEEL AST	,	
S/U/V:	Satisfactory		Comment:	same berm as 500 bbl tanks	
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					
Facilities:		<input type="checkbox"/> New Tank		Tank ID: _____	
Contents	#	Capacity	Type	SE GPS	
CONDENSATE	2	500 BBLS	STEEL AST	39.431530,-107.733600	
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					
Venting:					
Yes/No	Comment				
NO					
Flaring:					
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date	
Ignitor/Combustor	Satisfactory				

Predrill

Location ID: 334679

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: 285591 Type: WELL API Number: 045-12529 Status: PR Insp. Status: PR

Producing Well

Comment: plunger lift

Facility ID: 285592 Type: WELL API Number: 045-12528 Status: PR Insp. Status: PR

Producing WellComment: Facility ID: 285593 Type: WELL API Number: 045-12527 Status: PR Insp. Status: PR**Producing Well**Comment: Facility ID: 285597 Type: WELL API Number: 045-12526 Status: PR Insp. Status: PR**Producing Well**Comment: Facility ID: 292240 Type: WELL API Number: 045-14657 Status: PR Insp. Status: SI**Idle Well**Purpose: ☒ Shut In ☐ Temporarily Abandoned Reminder: S/V: Satisfactory CA Date: CA: Comment: Facility ID: 292241 Type: WELL API Number: 045-14656 Status: PR Insp. Status: PR**Producing Well**Comment: Facility ID: 292242 Type: WELL API Number: 045-14655 Status: PR Insp. Status: PR**Producing Well**Comment: Facility ID: 292243 Type: WELL API Number: 045-14654 Status: PR Insp. Status: PR**Producing Well**Comment: Facility ID: 292262 Type: WELL API Number: 045-14658 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: _____

Emission Control Burner (ECB): Y

Comment: _____

Pilot: ON Wildlife Protection Devices (fired vessels): YES**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? _____ CM _____
 CA _____ CA Date _____
 Guy line anchors marked? In CM _____
 CA _____ CA Date _____

1003b. Area no longer in use? Pass Production areas stabilized ? Pass1003c. Compacted areas have been cross ripped? Pass1003d. Drilling pit closed? Pass Subsidence over on drill pit? Pass

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? Pass 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 Pass**Final Reclamation/ Abandoned Location:**

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

Inspector Name: BURGER, CRAIG

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
Culverts	Pass	Culverts	Pass			
Seeding	Pass	Sediment Traps	Pass			
Sediment Traps	Pass	Rip Rap	Pass			
Ditches	Pass	Ditches	Pass			

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

Comment: _____

CA: _____