

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:
06/06/2013

Document Number:
669300621

Overall Inspection:
Satisfactory

FIELD INSPECTION FORM

Location Identifier	Facility ID <u>295831</u>	Loc ID <u>335945</u>	Inspector Name: <u>NEIDEL, KRIS</u>	On-Site Inspection <input type="checkbox"/>	2A Doc Num: _____
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Operator Information:

OGCC Operator Number: 100264 Name of Operator: XTO ENERGY INC

Address: 382 CR 3100

City: AZTEC State: NM Zip: 87410

Contact Information:

Contact Name	Phone	Email	Comment
Dooling, Jessica		jessica_dooling@xtoenergy.com	
Reid, Van		Cvan_reid@xtoenergy.com	

Compliance Summary:

QtrQtr: SENE Sec: 20 Twp: 2S Range: 97W

Inspector Comment:

A2 well shows PA in COGCC database, well is pickled and not PA.

Related Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	
294705	PIT	CL	05/11/2012		-	FU 297-20	<input type="checkbox"/>
295703	WELL	AL	10/28/2011	LO	103-11255	FREEDOM UNIT 297-20A1	<input type="checkbox"/>
295707	WELL	AL	10/07/2011	LO	103-11259	FREEDOM UNIT 297-20A6	<input type="checkbox"/>
295708	WELL	AL	10/07/2011	LO	103-11256	FREEDOM UNIT 297-20A7	<input type="checkbox"/>
295709	WELL	AL	10/07/2011	LO	103-11258	FREEDOM UNIT 297-20A8	<input type="checkbox"/>
295710	WELL	PR	10/08/2009	GW	103-11254	FREEDOM UNIT 297-20A3	<input checked="" type="checkbox"/>
295711	WELL	AL	10/07/2011	LO	103-11253	FREEDOM UNIT 297-20A5	<input type="checkbox"/>
295712	WELL	AL	10/13/2011	LO	103-11252	FREEDOM UNIT 297-20A4	<input type="checkbox"/>
295713	WELL	AL	10/13/2011	LO	103-11251	FREEDOM UNIT 297-20A9	<input type="checkbox"/>
295831	WELL	PA	03/15/2009	GW	103-11267	FREEDOM UNIT 297-20A2	<input checked="" type="checkbox"/>

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

Signs/Marker:				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
BATTERY	Satisfactory	location		
WELLHEAD	Satisfactory			

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
WELLHEAD	Satisfactory			

Venting:	
Yes/No	Comment

Flaring:				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date

Predrill

Location ID: 335945

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: 295710 Type: WELL API Number: 103-11254 Status: PR Insp. Status: PR

Producing Well

Comment: _____

Idle Well

Purpose: Shut In Temporarily Abandoned Reminder: _____
S/V: Satisfactory CA Date: _____
CA: _____
Comment: well currently pickled

Facility ID: 295831 Type: WELL API Number: 103-11267 Status: PA Insp. Status: PR

Producing Well

Comment: well currently pickled, not PA

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): _____
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? Pass CM _____ CA _____ CA Date _____

Guy line anchors marked? _____ CM _____
 CA _____ CA Date _____

1003b. Area no longer in use? Pass 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? Pass
 Production areas have been stabilized? Pass Segregated soils have been replaced? Pass

RESTORATION AND REVEGETATION

Cropland

Top soil replaced _____ Recontoured _____ Perennial forage re-established _____

Non-Cropland

Top soil replaced Pass Recontoured Pass 80% Revegetation Pass

1003 f. Weeds Noxious weeds? _____ P _____

Comment: _____

Overall Interim Reclamation Pass

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
Culverts	Pass	Gravel	Pass			
Rip Rap	Pass					
Ditches	Pass	Rip Rap	Pass			
Retention Ponds	Pass					
Berms	Pass	Compaction	Pass			

Inspector Name: NEIDEL, KRIS

Sediment Traps	Pass				
Seeding	Pass				
Compaction	Pass	Culverts	Pass		
Waddles	Pass				
Gravel	Pass	Sediment Traps	Pass		

S/U/V: Satisfactory Corrective Date: _____

Comment: _____

CA: _____

Permit:	Facility ID	Permit Num	Expiration Date
	294705	1433810	
	294705	1433810	