

**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 |
|----|----|----|----|

Inspection Date:  
08/12/2013

Document Number:  
670200763

Overall Inspection:  
Satisfactory

**FIELD INSPECTION FORM**

|                     |               |               |                      |                    |                          |
|---------------------|---------------|---------------|----------------------|--------------------|--------------------------|
| Location Identifier | Facility ID   | Loc ID        | Inspector Name:      | On-Site Inspection | <input type="checkbox"/> |
|                     | <u>257514</u> | <u>335249</u> | <u>BURGER, CRAIG</u> | 2A Doc Num:        |                          |

**Operator Information:**

OGCC Operator Number: 100185 Name of Operator: ENCANA OIL & GAS (USA) INC  
 Address: 370 17TH ST STE 1700  
 City: DENVER State: CO Zip: 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: SESE Sec: 26 Twp: 6S Range: 93W

| Insp. Date | Doc Num   | Insp. Type | Insp Status | Satisfactory /Unsatisfactory | PA P/F/I | Pas/Fail (P/F) | Violation (Y/N) |
|------------|-----------|------------|-------------|------------------------------|----------|----------------|-----------------|
| 10/12/2010 | 200280847 | PR         | PR          | S                            |          |                | N               |
| 07/09/2007 | 200116058 | PR         | PR          | S                            | I        | P              | N               |
| 12/30/2004 | 200066697 | PR         | PR          | S                            |          | P              | N               |
| 05/30/2002 | 200036052 | PR         | PR          | S                            |          | P              | N               |
| 11/06/2000 | 200013187 | DG         | DG          | S                            |          | P              | N               |

**Inspector Comment:**

**Related Facilities:**

| Facility ID | Type | Status | Status Date | Well Class | API Num   | Facility Name        |                                     |
|-------------|------|--------|-------------|------------|-----------|----------------------|-------------------------------------|
| 211130      | WELL | PR     | 10/10/1994  | GW         | 045-06889 | BENZEL 26-16 (P26NW) | <input checked="" type="checkbox"/> |
| 257512      | WELL | PR     | 06/01/2003  | GW         | 045-07566 | BENZEL 25-13 (P26NW) | <input checked="" type="checkbox"/> |
| 257513      | WELL | PR     | 06/01/2002  | GW         | 045-07567 | BENZEL 25-12 (P26NW) | <input checked="" type="checkbox"/> |
| 257514      | WELL | PR     | 03/24/2004  | GW         | 045-07568 | BENZEL 26-9 (P26NW)  | <input checked="" type="checkbox"/> |
| 257515      | WELL | PR     | 06/01/2002  | GW         | 045-07569 | BENZEL 36-4 (P26NW)  | <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**

| <b>Signs/Marker:</b> |                             |   |                   |         |
|----------------------|-----------------------------|---|-------------------|---------|
| Type                 | Satisfactory/Unsatisfactory | Comment   | Corrective Action | CA Date |
| BATTERY              | Satisfactory                |   |                   |         |
| TANK LABELS/PLACARDS | Satisfactory                |   |                   |         |
| WELLHEAD             | Satisfactory                | Signs need 1/4 1/4 section. See compliance schedule COGCC document number #2369022. |                   |         |

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

Comment: Revegetation sign on ground at location entrance.

Corrective Action: \_\_\_\_\_

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

| <b>Equipment:</b>           |   |                             |         |                   |         |
|-----------------------------|---|-----------------------------|---------|-------------------|---------|
| Type                        | # | Satisfactory/Unsatisfactory | Comment | Corrective Action | CA Date |
| Bird Protectors             | 5 | Satisfactory                |         |                   |         |
| Gas Meter Run               | 1 | Satisfactory                |         |                   |         |
| Plunger Lift                | 2 | Satisfactory                |         |                   |         |
| Horizontal Heated Separator | 5 | Satisfactory                |         |                   |         |
| Gathering Line              | 1 | Satisfactory                |         |                   |         |

**Facilities:**  New Tank Tank ID: \_\_\_\_\_

| Contents | # | Capacity | Type      | SE GPS |
|----------|---|----------|-----------|--------|
| METHANOL | 1 | 1000 GAL | STEEL AST | ,      |

S/U/V: Satisfactory Comment: Same berm as 300 bbl tanks.

Corrective Action: \_\_\_\_\_ Corrective Date: \_\_\_\_\_

**Paint**

|           |                   |
|-----------|-------------------|
| Condition | <u>Inadequate</u> |
|-----------|-------------------|

Other (Content) \_\_\_\_\_

Other (Capacity) \_\_\_\_\_

Other (Type) \_\_\_\_\_

**Berms**

| 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           | 39.491130,-107.735720 |  |
| S/U/V:             | Satisfactory                | Comment:                          |                     |                       |  |
| Corrective Action: |                             |                                   |                     | Corrective Date:      |  |
| <b>Paint</b>       |                             |                                   |                     |                       |  |
| Condition          | Adequate                    |                                   |                     |                       |  |
| Other (Content)    | _____                       |                                   |                     |                       |  |
| Other (Capacity)   | _____                       |                                   |                     |                       |  |
| Other (Type)       | _____                       |                                   |                     |                       |  |
| <b>Berms</b>       |                             |                                   |                     |                       |  |
| 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                     |                                   |                     |                       |  |
| NO                 |                             |                                   |                     |                       |  |
| <b>Flaring:</b>    |                             |                                   |                     |                       |  |
| Type               | Satisfactory/Unsatisfactory | Comment                           | Corrective Action   | CA Date               |  |
|                    |                             |                                   |                     |                       |  |

**Predrill**

Location ID: 335249

**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: 211130 Type: WELL API Number: 045-06889 Status: PR Insp. Status: PR

**Producing Well**

Comment: plunger lift

Facility ID: 257512 Type: WELL API Number: 045-07566 Status: PR Insp. Status: PR

**Producing Well**

Comment: producing well

Facility ID: 257513 Type: WELL API Number: 045-07567 Status: PR Insp. Status: PR

**Producing Well**

Comment: producing well

Facility ID: 257514 Type: WELL API Number: 045-07568 Status: PR Insp. Status: PR

**Producing Well**

Comment: producing well

Facility ID: 257515 Type: WELL API Number: 045-07569 Status: PR Insp. Status: PR

**Producing Well**

Comment: plunger lift

**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): N \_\_\_\_\_

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

Pilot: \_\_\_\_\_ 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? \_\_\_\_\_ 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? 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

**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 |
| Sediment Traps      | Pass            | Compaction              | Pass                  |               |                          |         |
| Rip Rap             | Pass            |                         |                       |               |                          |         |
| Ditches             | Pass            | Ditches                 | Pass                  |               |                          |         |
| Gravel              | Pass            | Gravel                  | Pass                  |               |                          |         |

S/U/V: Satisfactory                      Corrective Date: \_\_\_\_\_

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

CA: \_\_\_\_\_