

**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:

08/26/2013

Document Number:

670200794

Overall Inspection:

Satisfactory**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection
	<u>291924</u>	<u>334618</u>	<u>BURGER, CRAIG</u>	<input type="checkbox"/> 2A Doc Num: _____

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: NWNW Sec: 25 Twp: 7S Range: 93W**Inspector Comment:**

No sign of abandoned locations API#045-14547 and 045-15412 on pad.

Related Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	
280630	WELL	PR	07/29/2008	GW	045-11302	MCU 26-8C (D25W)	<input type="checkbox"/>
280631	WELL	PR	09/20/2006	GW	045-11301	HMU 26-1C (D25W)	<input type="checkbox"/>
291924	WELL	AL	06/21/2011	LO	045-14547	HMU 25-4D(D25W)	<input checked="" type="checkbox"/>
291925	WELL	PR	07/26/2008	GW	045-14546	HMU 25-3D(D25W)	<input type="checkbox"/>
294383	WELL	AL	06/21/2011	LO	045-15412	HMU 25-6A (D25W)	<input checked="" type="checkbox"/>
420624	WELL	XX	11/21/2012	LO	045-20189	HMU Federal 24-13D1 (D25W)	<input type="checkbox"/>
420626	WELL	XX	11/21/2012	LO	045-20190	HMU Federal 24-14A1 (D25W)	<input type="checkbox"/>
420627	WELL	XX	11/21/2012	LO	045-20191	HMU Federal 24-13A1 (D25W)	<input type="checkbox"/>
420628	WELL	XX	11/21/2012	LO	045-20192	HMU Federal 24-13D2 (D25W)	<input type="checkbox"/>
420629	WELL	XX	12/14/2012	LO	045-20193	HMU Federal 24-14A3 (D25W)	<input type="checkbox"/>
420632	WELL	XX	11/21/2012	LO	045-20194	HMU Federal 24-14A2 (D25W)	<input type="checkbox"/>
420634	WELL	XX	11/21/2012	LO	045-20195	HMU Federal 25-3C (D25W)	<input type="checkbox"/>
420636	WELL	XX	11/21/2012	LO	045-20196	HMU Fee 25-6B (D25W)	<input type="checkbox"/>
420637	WELL	XX	11/21/2012	LO	045-20197	HMU Fee 25-6D (D25W)	<input type="checkbox"/>
420638	WELL	XX	11/21/2012	LO	045-20198	HMU Fee 23-16B1 (D25W)	<input type="checkbox"/>
420639	WELL	XX	01/30/2013	LO	045-20199	HMU Federal 26-1B (D25W)	<input type="checkbox"/>
420641	WELL	XX	11/21/2012	LO	045-20200	HMU Fee 23-16C1 (D25W)	<input type="checkbox"/>
420642	WELL	XX	11/21/2012	LO	045-20201	HMU Fee 23-16B2 (D25W)	<input type="checkbox"/>
420643	WELL	XX	11/21/2012	LO	045-20202	HMU Fee 23-16D (D25W)	<input type="checkbox"/>
422050	WELL	XX	01/30/2013	LO	045-20484	HMU Federal 26-1D (D25W)	<input type="checkbox"/>

422053	WELL	XX	01/30/2013	LO	045-20487	HMU Federal 26-8B1 (D25W)	
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Equipment:Location Inventory

Special Purpose Pits: 1	Drilling Pits: _____	Wells: 19	Production Pits: _____
Condensate Tanks: _____	Water Tanks: _____	Separators: 19	Electric Motors: _____
Gas or Diesel Motors: _____	Cavity Pumps: _____	LACT Unit: _____	Pump Jacks: _____
Electric Generators: _____	Gas Pipeline: 1	Oil Pipeline: _____	Water Pipeline: _____
Gas Compressors: _____	VOC Combustor: _____	Oil Tanks: _____	Dehydrator Units: _____
Multi-Well Pits: _____	Pigging Station: _____	Flare: _____	Fuel Tanks: _____

Location

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

Corrective Date: _____

Comment: _____

Corrective Action: _____

Spills:

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

Yes/No	Comment

Flaring:

Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date

Predrill

Location ID: 334618

Site Preparation:

Lease Road Adeq.: _____ Pads: _____ Soil Stockpile: _____

Corrective Action: _____ Date: _____ CDP Num.: _____

Form 2A COAs:

Group	User	Comment	Date
OGLA	kubeczkod	All pits containing fluids (if constructed; reserve pit, production pit, frac pit) must be lined.	09/29/2010
OGLA	kubeczkod	Operator must implement best management practices to contain any unintentional release of fluids.	09/29/2010
OGLA	kubeczkod	Location may be in a sensitive area because of shallow groundwater; therefore any pits containing fluids (if constructed) must be lined.	09/29/2010

OGLA	kubeczkod	No portion of any pit that will be used to hold liquids shall be constructed on fill material, unless the pit and fill slope are designed and certified by a professional engineer, subject to review and approval by the director prior to construction of the pit. The construction and lining of the pit shall be supervised by a professional engineer or their agent. The entire base of the pit must be in cut.	09/29/2010
OGLA	kubeczkod	The moisture content of any drill cuttings in a cuttings pit, trench, or pile shall be as low as practicable to prevent accumulation of liquids greater than de minimis amounts. At the time of closure, the drill cuttings must also meet the applicable standards of table 910-1.	09/29/2010
OGLA	kubeczkod	Operator must ensure 110 percent secondary containment for any volume of fluids contained at well site during drilling and completion operations; including, but not limited to, construction of a berm or diversion dike, diversion/collection trenches within and/or outside of berms/dikes, site grading, or other comparable measures sufficiently protective of nearby surface water. If fluids are conveyed via pipeline, operator must implement best management practices to contain any unintentional release of fluids.	09/29/2010
OGLA	kubeczkod	Location may be in a sensitive area because of shallow groundwater; therefore either a lined drilling pit or closed loop system (which EnCana has already indicated on the Form 2A) must be implemented.	09/29/2010

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: 291924 Type: WELL API Number: 045-14547 Status: AL Insp. Status: AL

Facility ID: 294383 Type: WELL API Number: 045-15412 Status: AL Insp. Status: AL

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: RANGELAND

Comment:

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 REVEGETATIONCropland

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

Non-Cropland

Top soil replaced _____ Recontoured _____ 80% Revegetation _____

1003 f. Weeds Noxious weeds? _____

Comment: _____

Overall Interim Reclamation _____

Final Reclamation/ Abandoned Location:

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

Final Land Use: RANGELAND, TIMBER

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

Inspector Name: BURGER, CRAIG

S/U/V:	_____	Corrective Date:	_____
Comment:	<div></div>		
CA:	<div></div>		