

**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:

10/04/2013

Document Number:

663902265

Overall Inspection:

Satisfactory**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection
	334917	334917	LONGWORTH, MIKE	<input type="checkbox"/> 2A Doc Num: _____

Operator Information:

OGCC Operator Number:

Name of Operator: WPX ENERGY ROCKY MOUNTAIN LLCAddress: 1001 17TH STREET - SUITE #1200City: DENVER State: CO Zip: 80202

- ☐ THIS IS A FOLLOW UP INSPECTION
- ☐ FOLLOW UP INSPECTION REQUIRED
- ☐ NO FOLLOW UP INSPECTION REQUIRED
- ☐ INSPECTOR REQUESTS FORM 42 WHEN CORRECTIVE ACTIONS ARE COMPLETED

Contact Information:

Contact Name	Phone	Email	Comment
KELLERBY, SHAUN		shaun.kellerby@state.co.us	
Gardner, Michael	970/285-9377 ext. 2760	Michael.Gardner@WPXEnerg y.com	Principal Environmental Specialist
Moss, Brad	(970) 285-9377	Brad.Moss@WPXEnergy.com	Production foreman

Compliance Summary:QtrQtr: SWSE Sec: 31 Twp: 6S Range: 95W**Inspector Comment:****Related Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	
264008	WELL	PR	02/12/2003	GW	045-08170	FEDERAL PA 334-31	<input checked="" type="checkbox"/>
264011	WELL	PR	02/12/2003	GW	045-08171	FEDERAL PA 34-31	<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 Motors: _____	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**Lease Road:**

Type	Satisfactory/Unsatisfactory	comment	Corrective Action	Date
Access	Unsatisfactory	road is washing	Maintain road	11/02/2013

Inspector Name: LONGWORTH, MIKE

Signs/Marker:				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
TANK LABELS/PLACARDS	Satisfactory			
WELLHEAD	Satisfactory			
BATTERY	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			
TANK BATTERY	Satisfactory			
SEPARATOR	Satisfactory			

Equipment:					
Type	#	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
Bird Protectors	2	Satisfactory			
Horizontal Heated Separator	2	Satisfactory			
Plunger Lift	2	Satisfactory			

Facilities: <input type="checkbox"/> New Tank Tank ID: _____					
Contents	#	Capacity	Type	SE GPS	
PRODUCED WATER	1	<100 BBLS	STEEL AST	39.475290,108.038890	
S/U/V:	Satisfactory	Comment: _____			
Corrective Action: _____				Corrective Date: _____	

Paint

Condition	Adequate
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Other (Content) _____

Other (Capacity) 80 bbl _____

Other (Type) _____

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Metal	Adequate	Walls Sufficient	Base Sufficient	Adequate

Corrective Action	Corrective Date
Comment	

Venting:	
Yes/No	Comment
YES	Bradens open to vent

Flaring:				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date

Predrill

Location ID: 334917

Site Preparation:

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

S/U/V: _____

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

Form 2A COAs:S/U/V: _____ **Comment:** _____CA: _____ **Date:** _____**Wildlife BMPs:**S/U/V: _____ **Comment:** _____CA: _____ **Date:** _____**Stormwater:**

Erosion BMPs	Present	Other BMPs	Present

S/U/V: _____

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**

Inspector Name: LONGWORTH, MIKE

Facility ID: 264008 Type: WELL API Number: 045-08170 Status: PR Insp. Status: PR

Producing Well

Comment: Producing well

Facility ID: 264011 Type: WELL API Number: 045-08171 Status: PR Insp. Status: PR

Producing Well

Comment: Producing well

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 Date
Waste Material Onsite? Pass CM CA Date
Unused or unneeded equipment onsite? Pass CM CA Date
Pit, cellars, rat holes and other bores closed? Pass CM CA Date
Guy line anchors removed? Pass CM CA Date
Guy line anchors marked? CM CA Date

1003b. Area no longer in use? In Production areas stabilized ? Pass1003c. 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? FailProduction areas have been stabilized? Segregated soils have been replaced? **RESTORATION AND REVEGETATION**CroplandTop soil replaced Recontoured Perennial forage re-established Non-CroplandTop soil replaced Recontoured 80% Revegetation 1003 f. Weeds Noxious weeds? Comment: Continue revegetation efforts. Submit Form 4 Interim ReclamationOverall Interim Reclamation Fail**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 Well Release on Active Location ☐ Multi-Well Location ☐**Storm Water:**

Loc Erosion BMPs	BMP Maintenance	Lease Road Erosion BMPs	Lease BMP Maintenance	Chemical BMPs	Chemical BMP Maintenance	Comment
Seeding	Fail	Gradient Terraces	Fail			
Gravel	Fail	Ditches	Fail			
Compaction	Fail	Compaction	Fail			
Ditches	Pass	Culverts	Pass			

Inspector Name: LONGWORTH, MIKE

S/U/V: Unsatisfactory Corrective Date: 11/02/2013

Comment: Road BMPs need maintained. Ditches full of sediment and road is has washing lines,

CA: Maintain road and BMPs

Pits: ☐ NO SURFACE INDICATION OF PIT