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

FIELD INSPECTION FORM

DE	ET	OE	ES

Inspection Date: 10/23/2013

Document Number: 673300064

Overall Inspection: Satisfactory

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	427395	427395	Lamont, Rich	☐	

Operator Information:

OGCC Operator Number:

Name of Operator: ENCANA OIL & GAS (USA) INC

Address: 370 17TH ST STE 1700

City: 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	
Papez, Gerald	(970) 260-8966	gerald.papez@encana.com	Ops - Mamm Creek area
Inspection, Encana		cogcc.inspections@encana.com	
Friesen, Kathy	(970) 285-2665	Kathy.Friesen@encana.com	Environmental Lead Piceance
Lamont, Rich	(970) 623-9301	rich.lamont@state.co.us	
Meath, Ryan	(970) 285-2600	Ryan.Meath@encana.com	Surface Management Coordinator

Compliance Summary:

QtrQtr: NWSE Sec: 21 Twp: 7S Range: 95W

Inspector Comment:

New pad-Frac operations currently underway.

Related Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status	
427396	WELL	WO		LO	045-21286	FEDERAL 21-15D (PJ21)	WO	X
427398	WELL	WO		LO	045-21287	FEDERAL 22-13BB (PJ21)	WO	X
427402	WELL	WO		LO	045-21288	FEDERAL 22-13CC (PJ21)	WO	X
427404	WELL	WO		LO	045-21289	FEDERAL ENCANA 21-6C (PJ21)	WO	X
427406	WELL	WO		LO	045-21290	FEDERAL 21-9D (PJ21)	WO	X
427407	WELL	WO		LO	045-21291	FEDERAL 22-13C (PJ21)	WO	X

Equipment: Location Inventory

Inspector Name: Lamont, Rich

Special Purpose Pits:		Drilling Pits:		Wells:	6	Production Pits:	
Condensate Tanks:		Water Tanks:	4	Separators:	6	Electric Motors:	
Gas or Diesel Mortors:		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:	1	Flare:		Fuel Tanks:	

Location

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

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

Comment:

Corrective Action:

Spills:				
Type	Area	Volume	Corrective action	CA Date

☐ Multilple Spills and Releases?

Fencing/:				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
	Satisfactory			

Equipment:					
Type	#	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
Vertical Heated Separator	6	Satisfactory			
Bird Protectors	2	Satisfactory			
Flare		Satisfactory			
Emission Control Device		Satisfactory			
Ancillary equipment		Satisfactory	Frac crew on location and in current stimulation operations		

Inspector Name: Lamont, Rich

Facilities: ☐ New Tank Tank ID: _____

Contents	#	Capacity	Type	SE GPS
CONDENSATE	2	500 BBLS	STEEL AST	39.421547,-107.999993

S/U/V:	Satisfactory	Comment:	All proper tank signage appears in place
Corrective Action:		Corrective Date:	

Paint

Condition	Adequate

Other (Content) _____

Other (Capacity) _____

Other (Type) _____

Berms

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

Corrective Action		Corrective Date	
Comment			

Venting:	
Yes/No	Comment
NO	

Flaring:				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date

Predrill

Location ID: 427395

Site Preparation:

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

S/U/V: _____

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

Form 2A COAs:

Group	User	Comment	Date
OGLA	kubeczkod	SITE SPECIFIC COAs: Operator must implement best management practices to contain any unintentional release of fluids, including any fluids conveyed via temporary surface or buried pipelines. Operator must ensure 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 (i.e., best management practices (BMPs) associated with stormwater management) sufficiently protective of nearby surface water. Any berm constructed at the well pad location will be stabilized, inspected at regular intervals (at least every 14 days), and maintained in good condition. Flowback and stimulation fluids must be sent to tanks, separators, or other containment/filtering equipment before the fluids can be placed into any pipeline or pit located on the well pad or into tanker trucks for offsite disposal. The flowback and stimulation fluid tanks, separators, or other containment/filtering equipment must be placed on the well pad in an area with additional downgradient perimeter berming. The area where flowback fluids will be stored/reused must be constructed to be sufficiently impervious to contain any spilled or released material. 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.	12/27/2011

S/U/V: _____ **Comment:** _____

CA: _____ **Date:** _____

Wildlife BMPs:

BMP Type	Comment
Wildlife	All wildlife stipulations and best management practices that apply, are applicable and that have been agreed to with the BLM and are presented in our approved South Parachute Geographic Area Plan for Oil & Gas Development (EA#COC140-2006-050) will be followed.

S/U/V: _____ **Comment:** _____

CA: _____ **Date:** _____

Stormwater:

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:

Inspector Name: Lamont, Rich

Onsite Inspection Memorandum Summarizing Discussions at Inspection as Attachment:

Facility

Facility ID: 427396 Type: WELL API Number: 045-21286 Status: WO Insp. Status: WO

Well Stimulation

Stimulation Company: Bayou Stimulation Type: ACID

Observation: Other:

Maximum Casing Recorded: 2350 PSI Tubing:

Surface: Intermediate:

Production: Instantaneous Shut-In Pressure (ISIP)

Bradenhead Psi: 32 Frac Flow Back: Fluid: Gas:

Facility ID: 427398 Type: WELL API Number: 045-21287 Status: WO Insp. Status: WO

Well Stimulation

Stimulation Company: Stimulation Type:

Observation: Other:

Maximum Casing Recorded: PSI Tubing:

Surface: Intermediate:

Production: Instantaneous Shut-In Pressure (ISIP)

Bradenhead Psi: Frac Flow Back: Fluid: Gas:

Facility ID: 427402 Type: WELL API Number: 045-21288 Status: WO Insp. Status: WO

Facility ID: 427404 Type: WELL API Number: 045-21289 Status: WO Insp. Status: WO

Well Stimulation

Stimulation Company: Stimulation Type:

Observation: Other:

Maximum Casing Recorded: PSI Tubing:

Surface: Intermediate:

Production: Instantaneous Shut-In Pressure (ISIP)

Bradenhead Psi: Frac Flow Back: Fluid: Gas:

Facility ID: 427406 Type: WELL API Number: 045-21290 Status: WO Insp. Status: WO

Well Stimulation

Stimulation Company: Stimulation Type:

Observation: Other:

Maximum Casing Recorded: PSI Tubing:

Surface: Intermediate:

Production: Instantaneous Shut-In Pressure (ISIP)

Bradenhead Psi: Frac Flow Back: Fluid: Gas:

Facility ID: 427407 Type: WELL API Number: 045-21291 Status: WO Insp. Status: WO

Inspector Name: Lamont, Rich

Well Stimulation

Stimulation Company: _____ Stimulation Type: _____

Observation: Other: _____

Maximum Casing Recorded: _____ PSI Tubing: _____

Surface: _____ Intermediate: _____

Production: _____ Instantaneous Shut-In Pressure (ISIP) _____

Bradenhead Psi: _____ Frac Flow Back: Fluid: _____ Gas: _____

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: Lat Long

DWR Receipt Num: _____ Owner Name: _____ GPS : _____ _____

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 _____

Inspector Name: Lamont, Rich

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 REVEGETATION

Cropland

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 In Process

Final Reclamation/ Abandoned Location:

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

Final Land Use: RANGELAND

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

S/U/V: Satisfactory Corrective Date: _____

Comment:

CA:

Pits: ☒ NO SURFACE INDICATION OF PIT