

**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:

12/17/2013

Document Number:

663902512

Overall Inspection:

Satisfactory**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	335275	335275	LONGWORTH, MIKE	<input type="checkbox"/>	

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
Gardner, Michael	970/285-9377 ext. 2760	Michael.Gardner@WPXEnerg y.com	Principal Environmental Specialist
Moss, Brad	(970) 285-9377	Brad.Moss@WPXEnerg.com	Production foreman
Kellerby, Shaun		shaun.kellerby@state.co.us	

Compliance Summary:QtrQtr: SWNE Sec: 28 Twp: 6S Range: 95W**Inspector Comment:****Related Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status	
111462	PIT		09/23/1999		-	1-W-28		<input type="checkbox"/>
210828	WELL	PR	10/03/1989	OW	045-06586	DOE 1-W-28	PR	<input checked="" type="checkbox"/>
260199	WELL	PR	10/29/2010	GW	045-07827	FEDERAL PA 32-28	PR	<input checked="" type="checkbox"/>
411898	WELL	PR	05/01/2011	GW	045-18398	FEDERAL PA 542-28	PR	<input checked="" type="checkbox"/>
411899	WELL	PR	07/31/2010	GW	045-18399	FEDERAL PA 532-28	PR	<input checked="" type="checkbox"/>
411900	WELL	PR	02/16/2011	GW	045-18400	FEDERAL PA 41-28	PR	<input checked="" type="checkbox"/>
411901	WELL	PR	04/16/2011	GW	045-18401	FEDERAL PA 344-21	PR	<input checked="" type="checkbox"/>
411902	WELL	PR	02/16/2011	GW	045-18402	FEDERAL PA 341-28	PR	<input checked="" type="checkbox"/>
411912	WELL	PR	07/31/2010	GW	045-18403	FEDERAL PA 432-28	PR	<input checked="" type="checkbox"/>
411913	WELL	PR	07/31/2010	GW	045-18404	FEDERAL PA 332-28	PR	<input checked="" type="checkbox"/>
411914	WELL	PR	07/31/2010	GW	045-18405	FEDERAL PA 433-28	PR	<input checked="" type="checkbox"/>
411915	WELL	PR	02/16/2011	GW	045-18406	FEDERAL PA 43-28	PR	<input checked="" type="checkbox"/>
411916	WELL	PR	04/16/2011	GW	045-18407	FEDERAL PA 343-28	PR	<input checked="" type="checkbox"/>
411917	WELL	PR	07/31/2010	GW	045-18408	FEDERAL PA 431-28	PR	<input checked="" type="checkbox"/>
411918	WELL	PR	07/31/2010	GW	045-18409	FEDERAL PA 531-28	PR	<input checked="" type="checkbox"/>
411919	WELL	PR	07/31/2010	GW	045-18410	FEDERAL PA 342-28	PR	<input checked="" type="checkbox"/>
411920	WELL	PR	02/16/2011	GW	045-18411	FEDERAL PA 442-28	PR	<input checked="" type="checkbox"/>

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411921	WELL	PR	04/16/2011	GW	045-18412	FEDERAL PA 441-28	PR	<input checked="" type="checkbox"/>
411922	WELL	AL	04/11/2012	LO	045-18413	FEDERAL PA 541-28	AL	<input type="checkbox"/>
411923	WELL	PR	02/16/2011	GW	045-18414	FEDERAL PA 42-28	PR	<input checked="" type="checkbox"/>
411924	WELL	PR	07/31/2010	GW	045-18415	FEDERAL PA 544-21	PR	<input checked="" type="checkbox"/>
411925	WELL	PR	06/30/2010	GW	045-18416	FEDERAL PA444-21	PR	<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: _____

LocationLease Road:

Type	Satisfactory/Unsatisfactory	comment	Corrective Action	Date
Access	Satisfactory	Snow packed and wet/muddy		

Signs/Marker:

Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
WELLHEAD	Satisfactory			
CONTAINERS	Satisfactory			
BATTERY	Satisfactory			
TANK LABELS/PLACARDS	Satisfactory			

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

Corrective Date: _____

Comment: _____

Corrective Action: _____

Spills:

Type	Area	Volume	Corrective action	CA Date
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☐ Multiple Spills and Releases?Fencing/:

Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
SEPARATOR	Satisfactory			
WELLHEAD	Satisfactory			
WELLHEAD	Satisfactory			

Equipment:

Type	#	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
Horizontal Heated Separator	20	Satisfactory			
Plunger Lift	19	Satisfactory			
Bird Protectors	11	Satisfactory			

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Ancillary equipment	2	Satisfactory	Well treatment chemical totes		
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Facilities: ☐ New Tank Tank ID: _____

Contents	#	Capacity	Type	SE GPS
PRODUCED WATER	1	300 BBLS	STEEL AST	39.497520,107.999630

S/U/V:	Satisfactory	Comment:	
Corrective Action:		Corrective Date:	

Paint

Condition	Adequate
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Other (Content) _____

Other (Capacity) _____

Other (Type) _____

Berms

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

Corrective Action		Corrective Date	
Comment			

Facilities: ☐ New Tank Tank ID: _____

Contents	#	Capacity	Type	SE GPS
CONDENSATE	3	300 BBLS	STEEL AST	,

S/U/V:	Satisfactory	Comment:	
Corrective Action:		Corrective Date:	

Paint

Condition	Adequate
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Other (Content) _____

Other (Capacity) _____

Other (Type) _____

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance

Corrective Action		Corrective Date	
Comment			

Venting:	
Yes/No	Comment
YES	Bradens are venting

Flaring:				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date

Predrill

Location ID: 335275

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:****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: 210828 Type: WELL API Number: 045-06586 Status: PR Insp. Status: PR

Producing Well

Comment: Producing well

Facility ID: 260199 Type: WELL API Number: 045-07827 Status: PR Insp. Status: PR

Producing Well

Comment: Producing well

Facility ID: 411898 Type: WELL API Number: 045-18398 Status: PR Insp. Status: PR

Producing Well

Comment: Producing well

Facility ID:	411899	Type:	WELL	API Number:	045-18399	Status:	PR	Insp. Status:	PR
Producing Well									
Comment:	Producing well								
Facility ID:	411900	Type:	WELL	API Number:	045-18400	Status:	PR	Insp. Status:	PR
Producing Well									
Comment:	Producing well								
Facility ID:	411901	Type:	WELL	API Number:	045-18401	Status:	PR	Insp. Status:	PR
Producing Well									
Comment:	Producing well								
Facility ID:	411902	Type:	WELL	API Number:	045-18402	Status:	PR	Insp. Status:	PR
Producing Well									
Comment:	Producing well								
Facility ID:	411912	Type:	WELL	API Number:	045-18403	Status:	PR	Insp. Status:	PR
Producing Well									
Comment:	Producing well								
Facility ID:	411913	Type:	WELL	API Number:	045-18404	Status:	PR	Insp. Status:	PR
Producing Well									
Comment:	Producing well								
Facility ID:	411914	Type:	WELL	API Number:	045-18405	Status:	PR	Insp. Status:	PR
Producing Well									
Comment:	Producing well								
Facility ID:	411915	Type:	WELL	API Number:	045-18406	Status:	PR	Insp. Status:	PR
Producing Well									
Comment:	Producing well								
Facility ID:	411916	Type:	WELL	API Number:	045-18407	Status:	PR	Insp. Status:	PR
Producing Well									
Comment:	Producing well								
Facility ID:	411917	Type:	WELL	API Number:	045-18408	Status:	PR	Insp. Status:	PR
Producing Well									
Comment:	Producing well								
Facility ID:	411918	Type:	WELL	API Number:	045-18409	Status:	PR	Insp. Status:	PR
Producing Well									
Comment:	Producing well								
Facility ID:	411919	Type:	WELL	API Number:	045-18410	Status:	PR	Insp. Status:	PR

Producing WellComment: **Producing well**Facility ID: 411920 Type: WELL API Number: 045-18411 Status: PR Insp. Status: PR**Producing Well**Comment: **Producing well**Facility ID: 411921 Type: WELL API Number: 045-18412 Status: PR Insp. Status: PR**Producing Well**Comment: **Producing well**Facility ID: 411923 Type: WELL API Number: 045-18414 Status: PR Insp. Status: PR**Producing Well**Comment: **Producing well**Facility ID: 411924 Type: WELL API Number: 045-18415 Status: PR Insp. Status: PR**Producing Well**Comment: **Producing well**Facility ID: 411925 Type: WELL API Number: 045-18416 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:

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: _____

Comment: Snow covering location

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? _____ 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: _____

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 _____

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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
Compaction	Pass	Compaction	Pass	MHSP	Pass	
		Ditches	Pass			
Ditches	Pass	Culverts	Pass			

S/U/V: Satisfactory _____ Corrective Date: _____

Comment: _____

CA: _____

Pits: ☐ NO SURFACE INDICATION OF PIT