

**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:

12/31/2013

Document Number:

663902581

Overall Inspection:

Unsatisfactory**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	335594	335594	LONGWORTH, MIKE	<input type="checkbox"/>	

Operator Information:

OGCC Operator Number:

Name of Operator: ENCANA OIL & GAS (USA) INCAddress: 370 17TH ST STE 1700City: 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
Insp., General	970-285-2665	cogcc.inspections@encana.com	
Kellerby, Shaun		shaun.kellerby@state.co.us	
IKENOUYE, TERI		teri.ikenouye@state.co.us	
YOKLEY, BILL		bill.yokley@state.co.us	

Compliance Summary:QtrQtr: SENE Sec: 29 Twp: 5S Range: 95W**Inspector Comment:**6 AL wells with conductors and cellars. 6 WO wells surface casings have been set. WO wells need MITs.**Related Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status	
281254	WELL	PR	11/14/2006	GW	045-11414	N.PARACHUTE EF 16D H29A 595	PR	<input checked="" type="checkbox"/>
281255	WELL	PR	11/08/2006	GW	045-11415	N.PARACHUTE EF 15B H29A 595	PR	<input checked="" type="checkbox"/>
281256	WELL	PR	11/10/2005	GW	045-11416	N.PARACHUTE EF01B H29A 595	PR	<input checked="" type="checkbox"/>
281257	WELL	PR	11/24/2006	GW	045-11417	N.PARACHUTE EF16B H29A 595	PR	<input checked="" type="checkbox"/>
281258	WELL	PR	11/03/2006	GW	045-11418	N.PARACHUTE EF09B H29A 595	PR	<input checked="" type="checkbox"/>
281259	WELL	PR	11/08/2006	GW	045-11419	N. PARACHUTE EF01D H29A 595	PR	<input checked="" type="checkbox"/>
281260	WELL	PR	11/10/2005	GW	045-11420	N.PARACHUTE EF 15D H29A 59	PR	<input checked="" type="checkbox"/>
281261	WELL	PR	11/28/2006	GW	045-11421	N.PARACHUTE EF 10D H29A 595	PR	<input checked="" type="checkbox"/>
296524	WELL	AL	07/08/2011	LO	045-16054	N. PARACHUTE EF02A-29	AL	<input type="checkbox"/>
296525	WELL	AL	09/16/2010	LO	045-16055	N. PARACHUTE EF02C-29	AL	<input type="checkbox"/>

Inspector Name: LONGWORTH, MIKE

296526	WELL	AL	07/08/2011	LO	045-16056	N. PARACHUTE EF14B-20	AL	
296527	WELL	AL	07/08/2011	LO	045-16057	N. PARACHUTE EF14A-20	AL	
296528	WELL	WO		GW	045-16058	N. PARACHUTE EF15D-20 H29A 5	WO	
296529	WELL	AL	07/08/2011	LO	045-16059	N. PARACHUTE EF14D-20	AL	
296530	WELL	WO	09/29/2011	LO	045-16060	N. PARACHUTE EF10C-20 H29A 5	WO	X
296531	WELL	AL	07/08/2011	LO	045-16061	N. PARACHUTE EF14C-20 H29A	AL	
296532	WELL	DG	04/28/2008	GW	045-16062	N. PARACHUTE EF15B-20 H29A 5	WO	X
296533	WELL	DG	04/28/2008	GW	045-16063	N. PARACHUTE EF16D-20 H29A 5	WO	X
296534	WELL	DG	04/28/2008	GW	045-16064	N. PARACHUTE EF10A20 H29A 59	WO	X
296535	WELL	DG	01/15/2009	GW	045-16065	N. PARACHUTE EF01B-29 H29A 5	WO	X
433716	PIT	AC	07/25/2013		-	H29A 433716	AC	

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**Lease Road:**

Type	Satisfactory/Unsatisfactory	comment	Corrective Action	Date
Access	Satisfactory	Snow packed		

Signs/Marker:

Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
WELLHEAD	Satisfactory			
TANK LABELS/PLACARDS	Unsatisfactory		Install sign to comply with rule 210.	12/13/2013
BATTERY	Satisfactory			
CONTAINERS	Satisfactory			

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

Corrective Date: _____

Comment: _____

Corrective Action: _____

Good Housekeeping:

Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
UNUSED EQUIPMENT	Unsatisfactory	17 unused sand traps	Remove unused equipment	01/31/2014

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	Around WO and AL wells		
Equipment:				
Type	#	Satisfactory/Unsatisfactory	Comment	Corrective Action
Other	2	Satisfactory	Gas lift sheds	
Ancillary equipment	2	Satisfactory	Chemical totes	
Plunger Lift	8	Satisfactory		
Gas Meter Run	2	Satisfactory		
Facilities:		<input type="checkbox"/> New Tank Tank ID: _____		
Contents	#	Capacity	Type	SE GPS
	1	<100 BBLS	STEEL AST	39.588390,-108.070470
S/U/V:	Unsatisfactory	Comment: No contents posted and expand metal over tank hatch.		
Corrective Action:	Post contents. Provide a lid to prevent venting			Corrective Date:
Paint				
Condition	Inadequate			
Other (Content)				
Other (Capacity)	80 bbls			
Other (Type)				
Berms				
Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Other	Inadequate			Inadequate
Corrective Action	Install berm			Corrective Date 01/31/2014
Comment	Berm is under sized and not being maintained			
Venting:				
Yes/No	Comment			
Flaring:				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date

Predrill

Location ID: 335594

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: 281254 Type: WELL API Number: 045-11414 Status: PR Insp. Status: PR

Producing Well

Comment: Producing well

Facility ID: 281255 Type: WELL API Number: 045-11415 Status: PR Insp. Status: PR

Producing Well

Comment: Producing well

Facility ID: 281256 Type: WELL API Number: 045-11416 Status: PR Insp. Status: PR

Producing Well

Comment: Producing well

Facility ID: 281257 Type: WELL API Number: 045-11417 Status: PR Insp. Status: PR

Producing Well

Comment: Producing well

Facility ID: 281258 Type: WELL API Number: 045-11418 Status: PR Insp. Status: PR

Producing Well

Comment: Producing well

Facility ID: 281259 Type: WELL API Number: 045-11419 Status: PR Insp. Status: PR

Producing Well

Comment: Producing well

Facility ID: 281260 Type: WELL API Number: 045-11420 Status: PR Insp. Status: PR

Producing Well

Comment:

Facility ID: 281261 Type: WELL API Number: 045-11421 Status: PR Insp. Status: PR

Producing Well

Comment: Producing well

Facility ID: 296530 Type: WELL API Number: 045-16060 Status: WO Insp. Status: WO

Idle Well

Purpose: ☐ Shut In ☒ Temporarily Abandoned Reminder:

S/V: Violation

CA Date: 01/31/2014

CA: Well must be either: 1) Put on production or 2) Per COGCC Rule 326.b.(1) a successful mechanical integrity test shall be performed on each temporarily abandoned well within thirty (30) days of the date the well becomes incapable of production or 3) Be properly plugged and abandoned. 4) A sundry requesting continued temporarily abandoned status should be submitted to Bob Koehler at the COGCC within thirty (30) days of receipt of this report - the sundry should detail the plan for the future operation of the well and the way the well is closed to the atmosphere. Shut-in and temporarily abandoned wells must be properly reported on COGCC Form 7, Operator's Monthly Production Report.

Comment:

Facility ID: 296532 Type: WELL API Number: 045-16062 Status: DG Insp. Status: WO

Idle Well

Purpose: ☐ Shut In ☒ Temporarily Abandoned Reminder:

S/V: Satisfactory

CA Date: 01/31/2014

CA:

Comment:

Facility ID: 296533 Type: WELL API Number: 045-16063 Status: DG Insp. Status: WO

Idle WellPurpose: ☐ Shut In ☒ Temporarily Abandoned Reminder: _____S/V: Violation CA Date: 01/31/2014

CA: Well must be either: 1) Put on production or 2) Per COGCC Rule 326.b.(1) a successful mechanical integrity test shall be performed on each temporarily abandoned well within thirty (30) days of the date the well becomes incapable of production or 3) Be properly plugged and abandoned. 4) A sundry requesting continued temporarily abandoned status should be submitted to Bob Koehler at the COGCC within thirty (30) days of receipt of this report - the sundry should detail the plan for the future operation of the well and the way the well is closed to the atmosphere. Shut-in and temporarily abandoned wells must be properly reported on COGCC Form 7, Operator's Monthly Production Report.

Comment: _____

Facility ID: 296534 Type: WELL API Number: 045-16064 Status: DG Insp. Status: WO**Idle Well**Purpose: ☐ Shut In ☒ Temporarily Abandoned Reminder: _____S/V: Violation CA Date: 01/31/2014

CA: Well must be either: 1) Put on production or 2) Per COGCC Rule 326.b.(1) a successful mechanical integrity test shall be performed on each temporarily abandoned well within thirty (30) days of the date the well becomes incapable of production or 3) Be properly plugged and abandoned. 4) A sundry requesting continued temporarily abandoned status should be submitted to Bob Koehler at the COGCC within thirty (30) days of receipt of this report - the sundry should detail the plan for the future operation of the well and the way the well is closed to the atmosphere. Shut-in and temporarily abandoned wells must be properly reported on COGCC Form 7, Operator's Monthly Production Report.

Comment: _____

Facility ID: 296535 Type: WELL API Number: 045-16065 Status: DG Insp. Status: WO**Idle Well**Purpose: ☐ Shut In ☒ Temporarily Abandoned Reminder: _____S/V: Violation CA Date: 01/31/2014

CA: Well must be either: 1) Put on production or 2) Per COGCC Rule 326.b.(1) a successful mechanical integrity test shall be performed on each temporarily abandoned well within thirty (30) days of the date the well becomes incapable of production or 3) Be properly plugged and abandoned. 4) A sundry requesting continued temporarily abandoned status should be submitted to Bob Koehler at the COGCC within thirty (30) days of receipt of this report - the sundry should detail the plan for the future operation of the well and the way the well is closed to the atmosphere. Shut-in and temporarily abandoned wells must be properly reported on COGCC Form 7, Operator's Monthly Production Report.

Comment: _____

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: _____

Inspector Name: LONGWORTH, MIKE

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 reclaim areas.**

1003a. Debris removed? Pass CM _____

CA _____ CA Date _____

Waste Material Onsite? Pass CM _____

CA _____ CA Date _____

Unused or unneeded equipment onsite? **Fail** CM **17 sand traps**

CA **Remove unused equipment** CA Date **01/31/2014**

Pit, cellars, rat holes and other bores closed? **Fail** CM **6 AL wells with conductors and cellars**

CA **Close conductors according to COGCC Conductor setting policy** CA Date **01/31/2014**

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 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 Fail

Final Reclamation/ Abandoned Location:

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

Final Land Use: _____

Reminder: _____

Comment: _____

Inspector Name: LONGWORTH, MIKE

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 <input type="checkbox"/>	Multi-Well Location <input type="checkbox"/>

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	Totes in secondary containment

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

Comment: _____

CA: _____

Pits: ☐ NO SURFACE INDICATION OF PIT

COGCC Comments

Comment	User	Date
	longworm	12/31/2013

Attached Documents

You can go to COGCC Images (<https://cogcc.state.co.us/weblink/>) and search by document number:

Document Num	Description	URL
663902581	INSPECTION APPROVED	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3254781