

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:
01/08/2014

Document Number:
670201121

Overall Inspection:
Unsatisfactory

FIELD INSPECTION FORM

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	300395	335511	BURGER, CRAIG	<input type="checkbox"/>	

Operator Information:

OGCC Operator Number: _____

Name of Operator: WPX ENERGY ROCKY MOUNTAIN LLC

Address: 1001 17TH STREET - SUITE #1200

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	NW Field Supervisor
LUJAN, CARLOS		carlos.lujan@state.co.us	
Gardner, Michael		Michael.Gardner@wpxenergy.com	Environmental Manager
Moss, Brad		Brad.Moss@wpxenergy.com	Production Foreman

Compliance Summary:

QtrQtr: SENW Sec: 24 Twp: 6S Range: 94W

Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Unsatisfactory	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
01/03/2011	200295540	PR	PR	Satisfactory			No
06/16/2010	200261031	PR	PR	Satisfactory			No

Inspector Comment:

Inspection is unsatisfactory because interim reclamation has not been performed.

Related Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
300395	WELL	PR	06/01/2011	GW	045-17901	DOWNING RWF 522-24	PR <input checked="" type="checkbox"/>
300396	WELL	PR	06/30/2010	GW	045-17902	DOWNING RWF 22-24	PR <input checked="" type="checkbox"/>
300397	WELL	PR	06/30/2010	GW	045-17903	DOWNING RWF 511-24	PR <input checked="" type="checkbox"/>
300398	WELL	PR	06/30/2010	GW	045-17904	DOWNING RWF 311-24	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 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

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
<input type="checkbox"/> Multiple Spills and Releases?				

Fencing/:				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
TANK BATTERY	Satisfactory	wire fence		
SEPARATOR	Satisfactory	wire fence		
WELLHEAD	Satisfactory	wire fence		
PIT	Satisfactory	barbed wire		

Equipment:					
Type	#	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
Gas Meter Run	1	Satisfactory			
Plunger Lift	4	Satisfactory			
Emission Control Device	1	Satisfactory			
Bird Protectors	2	Satisfactory			
Horizontal Heated Separator	4	Satisfactory			
Pig Station	1	Satisfactory			
Gathering Line	1	Satisfactory			
Ancillary equipment	1	Satisfactory	descaler unit		

Facilities: New Tank Tank ID: _____

Contents	#	Capacity	Type	SE GPS
PRODUCED WATER	1	300 BBLS	STEEL AST	,
S/U/V:	Satisfactory	Comment:	same berm as condensate tanks	
Corrective Action:				Corrective Date:

Paint

Condition	Adequate
Other (Content)	_____
Other (Capacity)	_____
Other (Type)	_____

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Corrective Action				Corrective Date
Comment				

Facilities: New Tank Tank ID: _____

Contents	#	Capacity	Type	SE GPS
CONDENSATE	2	300 BBLS	STEEL AST	39.512020,-107.840550
S/U/V:	Satisfactory	Comment:		
Corrective Action:				Corrective Date:

Paint

Condition	Adequate
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				

Venting:

Yes/No	Comment
YES	bradenhead valves open

Flaring:

Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
Ignitor/Combustor	Satisfactory			

Predrill

Location ID: 300395

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: 300395 Type: WELL API Number: 045-17901 Status: PR Insp. Status: PR

Producing Well

Comment: Plunger lift

Facility ID: 300396 Type: WELL API Number: 045-17902 Status: PR Insp. Status: PR

Producing Well

Comment: Plunger lift

Facility ID: 300397 Type: WELL API Number: 045-17903 Status: PR Insp. Status: PR

Producing Well

Comment: Plunger lift

Facility ID: 300398 Type: WELL API Number: 045-17904 Status: PR Insp. Status: PR

Producing Well

Comment: Plunger lift

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): Y

Comment:

Pilot: ON Wildlife Protection Devices (fired vessels): YES

Reclamation - Storm Water - Pit

Interim Reclamation:

Date Interim Reclamation Started: Date Interim Reclamation Completed:

Land Use:

Comment: Closure of cuttings pit has not been performed. Wells have been producing since 2010.

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? Fail Production areas stabilized? Pass

1003c. Compacted areas have been cross ripped? _____
 1003d. Drilling pit closed? Fail 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? Pass 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: _____

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
Compaction	Pass	Compaction	Pass			

S/U/V: Satisfactory Corrective Date: _____

Comment: Snow cover limited inspection.

CA: _____

Pits: NO SURFACE INDICATION OF PIT

Pit Type: Drilling Pit Lined: _____ Pit ID: _____ Lat: 39.512010 Long: -107.839440

Lining:

Liner Type: _____ Liner Condition: _____

Comment: Liner appears to have been removed.

Fencing:

Fencing Type: Wildlife Fencing Condition: Inadequate

Comment: Fence wire down in areas.

Netting:

Netting Type: _____ Netting Condition: _____

Comment: Pit empty.

Anchor Trench Present: _____ Oil Accumulation: _____ 2+ feet Freeboard: _____

Pit (S/U/V): Unsatisfactory Comment: _____

Corrective Action: Work with COGCC Environmental Protection Specialist to close the pit. Date: 03/28/2014