

**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:

01/09/2014

Document Number:

670201125

Overall Inspection:

Satisfactory**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	
	211107	335160	BURGER, CRAIG	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	NW Field Supervisor
Moss, Brad		Brad.Moss@wpxenergy.com	Production Foreman
Gardner, Michael		Michael.Gardner@wpxenergy.com	Environmental Manager

Compliance Summary:QtrQtr: SWSE Sec: 16 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)
03/17/2010	200239284	PR	PR	Satisfactory			No
01/18/2000	200004673	PR	PR	Satisfactory		Pass	No

Inspector Comment:**Related Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status	
211107	WELL	PR	11/07/1994	GW	045-06866	CLOUGH RMV 4-16	PR	<input checked="" type="checkbox"/>
279769	WELL	PR	04/27/2007	GW	045-11084	CLOUGH RWF 343-16	PR	<input checked="" type="checkbox"/>
279896	WELL	PR	04/27/2007	GW	045-11095	CLOUGH RWF 433-16	PR	<input checked="" type="checkbox"/>
279897	WELL	PR	04/27/2007	GW	045-11096	CLOUGH RMV 164-16	PR	<input checked="" type="checkbox"/>
279899	WELL	PR	04/27/2007	GW	045-11097	CLOUGH RWF 431-21	PR	<input checked="" type="checkbox"/>
279901	WELL	PR	04/27/2007	GW	045-11098	CLOUGH RWF 534-16	PR	<input checked="" type="checkbox"/>
279903	WELL	PR	07/31/2008	GW	045-11099	CLOUGH RWF 33-16	PR	<input checked="" type="checkbox"/>
279904	WELL	PR	04/27/2007	GW	045-11100	CLOUGH RMV 151-21	PR	<input checked="" type="checkbox"/>
279907	WELL	PR	04/27/2007	GW	045-11101	CLOUGH RWF 434-16	PR	<input checked="" type="checkbox"/>
279908	WELL	PR	08/18/2008	GW	045-11103	CLOUGH RWF 541-21	PR	<input checked="" type="checkbox"/>
279909	WELL	PR	07/31/2008	GW	045-11102	CLOUGH RWF 334-16	PR	<input checked="" type="checkbox"/>
279910	WELL	PR	04/27/2007	GW	045-11104	CLOUGH RWF 333-16	PR	<input checked="" type="checkbox"/>
279911	WELL	PR	04/27/2007	GW	045-11105	CLOUGH RWF 344-16	PR	<input checked="" type="checkbox"/>

279912	WELL	PR	04/27/2007	GW	045-11106	CLOUGH RWF 543-16	PR	<input checked="" type="checkbox"/>
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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**Signs/Marker:**

Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
BATTERY	Satisfactory			
TANK LABELS/PLACARDS	Satisfactory			
WELLHEAD	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
TANK BATTERY	Satisfactory	wire fence		
SEPARATOR	Satisfactory	wire fence		
WELLHEAD	Satisfactory	wire fence		

Equipment:

Type	#	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
Plunger Lift	14	Satisfactory			
Gas Meter Run	1	Satisfactory			
Pig Station	1	Satisfactory			
Bird Protectors	8	Satisfactory			
Gathering Line	1	Satisfactory			
Horizontal Heated Separator	14	Satisfactory			

Facilities:		<input type="checkbox"/> New Tank		Tank ID: _____	
Contents	#	Capacity	Type	SE GPS	
CONDENSATE	1	300 BBLS	STEEL AST	,	
S/U/V:	Satisfactory		Comment: Same berm as 400 bbl tanks.		
Corrective Action:				Corrective Date:	
<u>Paint</u>					
Condition	Adequate				
Other (Content) _____					
Other (Capacity) _____					
Other (Type) _____					
<u>Berms</u>					
Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance	
Corrective Action				Corrective Date	
Comment					

Facilities:		<input type="checkbox"/> New Tank		Tank ID: _____	
Contents	#	Capacity	Type	SE GPS	
PRODUCED WATER	2	200 BBLS	STEEL AST	,	
S/U/V:	Satisfactory		Comment: Same berm as 400 bbl tanks.		
Corrective Action:				Corrective Date:	
<u>Paint</u>					
Condition	Adequate				
Other (Content) _____					
Other (Capacity) _____					
Other (Type) _____					
<u>Berms</u>					
Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance	
Corrective Action				Corrective Date	
Comment					

Facilities:		<input type="checkbox"/> New Tank		Tank ID: _____	
Contents	#	Capacity	Type	SE GPS	
CONDENSATE	2	400 BBLS	STEEL AST	39.519830,-107.889240	
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	
Earth	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	

Predrill

Location ID: 211107

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: 211107 Type: WELL API Number: 045-06866 Status: PR Insp. Status: PR

Producing Well

Comment: Plunger lift

Facility ID: 279769 Type: WELL API Number: 045-11084 Status: PR Insp. Status: PR

Producing Well

Comment: Plunger lift

Facility ID: 279896 Type: WELL API Number: 045-11095 Status: PR Insp. Status: PR

Producing Well

Comment: Plunger lift

Facility ID:	279897	Type:	WELL	API Number:	045-11096	Status:	PR	Insp. Status:	PR
Producing Well									
Comment:	Plunger lift								
Facility ID:	279899	Type:	WELL	API Number:	045-11097	Status:	PR	Insp. Status:	PR
Producing Well									
Comment:	Plunger lift								
Facility ID:	279901	Type:	WELL	API Number:	045-11098	Status:	PR	Insp. Status:	PR
Producing Well									
Comment:	Plunger lift								
Facility ID:	279903	Type:	WELL	API Number:	045-11099	Status:	PR	Insp. Status:	PR
Producing Well									
Comment:	Plunger lift								
Facility ID:	279904	Type:	WELL	API Number:	045-11100	Status:	PR	Insp. Status:	PR
Producing Well									
Comment:	Plunger lift								
Facility ID:	279907	Type:	WELL	API Number:	045-11101	Status:	PR	Insp. Status:	PR
Producing Well									
Comment:	Plunger lift								
Facility ID:	279908	Type:	WELL	API Number:	045-11103	Status:	PR	Insp. Status:	PR
Producing Well									
Comment:	Plunger lift								
Facility ID:	279909	Type:	WELL	API Number:	045-11102	Status:	PR	Insp. Status:	PR
Producing Well									
Comment:	Plunger lift								
Facility ID:	279910	Type:	WELL	API Number:	045-11104	Status:	PR	Insp. Status:	PR
Producing Well									
Comment:	Plunger lift								
Facility ID:	279911	Type:	WELL	API Number:	045-11105	Status:	PR	Insp. Status:	PR
Producing Well									
Comment:	Plunger lift								
Facility ID:	279912	Type:	WELL	API Number:	045-11106	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:

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

Field Parameters:

Sample Location: _____

Emission Control Burner (ECB): N

Comment: _____

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

Reclamation - Storm Water - Pit**Interim Reclamation:**

Date Interim Reclamation Started: _____ Date Interim Reclamation Completed: _____

Land Use: _____

Comment: Snow cover limited inspection.

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 ? Pass

1003c. Compacted areas have been cross ripped? _____

1003d. Drilling pit closed? Pass 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

Inspector Name: BURGER, CRAIG

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

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: _____ Corrective Date: _____

Comment: **Snow cover limited inspection.**

CA: _____

Pits: ☐ NO SURFACE INDICATION OF PIT