

**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:

01/10/2014

Document Number:

663902635

Overall Inspection:

Satisfactory**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	<u>334706</u>	<u>334706</u>	<u>LONGWORTH, MIKE</u>	<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: S2NE Sec: 1 Twp: 7S Range: 95W**Inspector Comment:****Related Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status	
210941	WELL	PR	01/28/1991	OW	045-06699	GRAND VALLEY RANCH CO GV 83-1	PR	<input checked="" type="checkbox"/>
283569	WELL	PR	03/02/2006	GW	045-11940	DIAMOND ELK PA 31-1	PR	<input checked="" type="checkbox"/>
283587	WELL	PR	03/02/2006	GW	045-11964	DIAMOND ELK PA 42-1	PR	<input checked="" type="checkbox"/>
291028	WELL	PR	06/13/2007	GW	045-14268	DIAMOND ELK PA 431-1	PR	<input checked="" type="checkbox"/>
291029	WELL	PR	06/13/2007	GW	045-14267	DIAMOND ELK PA 332-1	PR	<input checked="" type="checkbox"/>
291031	WELL	PR	06/13/2007	GW	045-14266	DIAMOND ELK PA 432-1	PR	<input checked="" type="checkbox"/>
291033	WELL	PR	07/08/2009	GW	045-14265	DIAMOND ELK PA 342-1	PR	<input checked="" type="checkbox"/>
291062	WELL	PR	06/14/2007	GW	045-14278	DIAMOND ELK PA 41-1	PR	<input checked="" type="checkbox"/>
291063	WELL	PR	06/29/2008	GW	045-14279	DIAMOND ELK PA 331-1	PR	<input checked="" type="checkbox"/>
291189	WELL	PR	07/31/2008	GW	045-14315	DIAMOND ELK PA 541-1	PR	<input checked="" type="checkbox"/>
291192	WELL	PR	06/29/2008	GW	045-14316	DIAMOND ELK PA 441-1	PR	<input checked="" type="checkbox"/>
291207	WELL	PR	06/29/2007	GW	045-14321	DIAMOND ELK PA 341-1	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: _____

Location**Lease Road:**

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

Signs/Marker:

Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
BATTERY	Satisfactory			
TANK LABELS/PLACARDS	Unsatisfactory	210 bbl Methanol tank needs additional information. Volume, operator name, and contact #	Install sign to comply with rule 210.	01/31/2014
WELLHEAD	Satisfactory			
CONTAINERS	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
WELLHEAD	Satisfactory			
SEPARATOR	Satisfactory			
TANK BATTERY	Satisfactory			

Equipment:

Type	#	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
Plunger Lift	12	Satisfactory			
Horizontal Heated Separator	12	Satisfactory			
Bird Protectors	6	Satisfactory			
Ancillary equipment	3	Satisfactory	Chemical totes at wells		

Facilities:		<input type="checkbox"/> New Tank	Tank ID: _____	
Contents	#	Capacity	Type	SE GPS
METHANOL	1	200 BBLS	STEEL AST	39.469910,-107.943120
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	
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Comment	
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Facilities:	<input type="checkbox"/> New Tank	Tank ID: _____
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Contents	#	Capacity	Type	SE GPS
CONDENSATE	2	300 BBLS	STEEL AST	39.469990,-107.943160

S/U/V:	Satisfactory	Comment:		
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Corrective Action:		Corrective Date:	
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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	
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Comment	
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Facilities:		<input type="checkbox"/> New Tank		Tank ID: _____	
Contents	#	Capacity	Type	SE GPS	
PRODUCED WATER	2	300 BBLS	STEEL AST	,	
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	
Corrective Action					Corrective Date
Comment					
Venting:					
Yes/No		Comment			
Flaring:					
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date	

Predrill

Location ID: 334706

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: 210941 Type: WELL API Number: 045-06699 Status: PR Insp. Status: PR

Producing Well

Comment: Producing well

Facility ID: 283569 Type: WELL API Number: 045-11940 Status: PR Insp. Status: PR

Producing Well

Comment: Producing well

Facility ID: 283587 Type: WELL API Number: 045-11964 Status: PR Insp. Status: PR

Producing Well

Comment: Producing well

Facility ID: 291028	Type: WELL	API Number: 045-14268	Status: PR	Insp. Status: PR
Producing Well				
Comment: Producing well				

Facility ID: 291029	Type: WELL	API Number: 045-14267	Status: PR	Insp. Status: PR
Producing Well				
Comment: Producing well				

Facility ID: 291031	Type: WELL	API Number: 045-14266	Status: PR	Insp. Status: PR
Producing Well				
Comment: Producing well				

Facility ID: 291033	Type: WELL	API Number: 045-14265	Status: PR	Insp. Status: PR
Producing Well				
Comment: Producing well				

Facility ID: 291062	Type: WELL	API Number: 045-14278	Status: PR	Insp. Status: PR
Producing Well				
Comment: Producing well				

Facility ID: 291063	Type: WELL	API Number: 045-14279	Status: PR	Insp. Status: PR
Producing Well				
Comment: Producing well				

Facility ID: 291189	Type: WELL	API Number: 045-14315	Status: PR	Insp. Status: PR
Producing Well				
Comment: Producing well				

Facility ID: 291192	Type: WELL	API Number: 045-14316	Status: PR	Insp. Status: PR
Producing Well				
Comment: Producing well				

Facility ID: 291207	Type: WELL	API Number: 045-14321	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 _____

Inspector Name: LONGWORTH, MIKE

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: _____

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 REVEGETATION

Cropland

Top soil replaced _____ Recontoured _____ Perennial forage re-established _____

Non-Cropland

Top soil replaced _____ Recontoured _____ 80% Revegetation _____

1003 f. Weeds Noxious weeds? _____

Comment: **Snow covering location and reclaim area unable to inspect**

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
Berms		Compaction	Pass	MHSP	Pass	
Seeding						
Compaction	Pass	Ditches				

S/U/V: Satisfactory _____

Corrective Date: _____

Comment: snow covered BMPs

CA: _____

Pits: ☐ NO SURFACE INDICATION OF PIT