

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



DE	ET	OE	ES
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Inspection Date:
01/14/2014

Document Number:
670201145

Overall Inspection:
Satisfactory

FIELD INSPECTION FORM

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	<u>265645</u>	<u>334649</u>	<u>BURGER, CRAIG</u>	<input type="checkbox"/>	

Operator Information:

OGCC Operator Number: _____

Name of Operator: ENCANA OIL & GAS (USA) INC

Address: 370 17TH ST STE 1700

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
Inspections, General		cogcc.inspections@encana.com	
Kellerby, Shaun		Shaun.Kellerby@state.co.us	NW Field Supervisor

Compliance Summary:

QtrQtr: SWSW Sec: 3 Twp: 7S Range: 93W

Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Unsatisfactory	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
03/28/2007	200108131	PR	PR	Satisfactory	I	Pass	No
05/15/2006	200096691	PR	PR	Satisfactory	I	Pass	No
01/08/2004	200053456	PR	PR	Satisfactory	I	Pass	No

Inspector Comment:

Related Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status	
265640	WELL	PR	10/19/2003	GW	045-09042	GMR 4-16D (M3A)	PR	<input checked="" type="checkbox"/>
265641	WELL	PR	10/17/2003	GW	045-09043	GMR 3-11B (M3A)	PR	<input checked="" type="checkbox"/>
265642	WELL	PR	08/29/2003	GW	045-09044	GMR 9-1D (M3A)	PR	<input checked="" type="checkbox"/>
265643	WELL	PR	10/15/2003	GW	045-09045	GMR 4-9D (M3A)	PR	<input checked="" type="checkbox"/>
265645	WELL	PR	09/08/2003	GW	045-09046	GMR 3-13D (M3A)	PR	<input checked="" type="checkbox"/>
265646	WELL	PR	10/10/2003	GW	045-09047	GMR 3-13A (M3A)	PR	<input checked="" type="checkbox"/>
265647	WELL	PR	08/28/2003	GW	045-09048	GMR 3-13B (M3A)	PR	<input checked="" type="checkbox"/>
266010	WELL	PR	09/10/2003	GW	045-09051	HMU 3-14D (M3A)	PR	<input checked="" type="checkbox"/>
266011	WELL	PR	09/05/2003	GW	045-09049	HMU 10-3B (M3A)	PR	<input checked="" type="checkbox"/>
266012	WELL	PR	10/13/2003	GW	045-09050	HMU 3-14B (M3A)	PR	<input checked="" type="checkbox"/>
273556	WELL	PR	11/26/2005	GW	045-10260	GMR 3-12D (M3A)	PR	<input checked="" type="checkbox"/>
273557	WELL	PR	12/01/2005	GW	045-10261	GMR 3-13C (M3A)	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			
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
<input type="checkbox"/> Multiple Spills and Releases?				

Equipment:					
Type	#	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
Vertical Heated Separator	12	Satisfactory			
Bird Protectors	4	Satisfactory			
Plunger Lift	12	Satisfactory			
Ancillary equipment	1	Satisfactory	muffler unit		
Deadman # & Marked	8	Satisfactory			
Emission Control Device	1	Satisfactory	No sight glass on unit.		
Gas Meter Run	1	Satisfactory			

Facilities: New Tank Tank ID: _____

Contents	#	Capacity	Type	SE GPS
METHANOL	2	<50 BBLS	STEEL AST	,
S/U/V:	Satisfactory	Comment:	Same berm as 300 bbl 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	3	300 BBLS	STEEL AST	39.468990,-107.768850
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
NO	

Flaring:

Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
Ignitor/Combustor	Unsatisfactory	No sight glass to check pilot light.	Provide means to verify pilot light is on.	02/28/2014

Predrill

Location ID: 265645

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: 265640 Type: WELL API Number: 045-09042 Status: PR Insp. Status: PR

Producing Well

Comment: **plunger lift**

Facility ID: 265641 Type: WELL API Number: 045-09043 Status: PR Insp. Status: PR

Producing Well

Comment: **plunger lift**

Facility ID: 265642 Type: WELL API Number: 045-09044 Status: PR Insp. Status: PR

Producing Well

Comment: **plunger lift**

Facility ID: 265643	Type: WELL	API Number: 045-09045	Status: PR	Insp. Status: PR
Producing Well				
Comment: plunger lift				
Facility ID: 265645	Type: WELL	API Number: 045-09046	Status: PR	Insp. Status: PR
Producing Well				
Comment: plunger lift				
Facility ID: 265646	Type: WELL	API Number: 045-09047	Status: PR	Insp. Status: PR
Producing Well				
Comment: plunger lift				
Facility ID: 265647	Type: WELL	API Number: 045-09048	Status: PR	Insp. Status: PR
Producing Well				
Comment: plunger lift				
Facility ID: 266010	Type: WELL	API Number: 045-09051	Status: PR	Insp. Status: PR
Producing Well				
Comment: plunger lift				
Facility ID: 266011	Type: WELL	API Number: 045-09049	Status: PR	Insp. Status: PR
Producing Well				
Comment: plunger lift				
Facility ID: 266012	Type: WELL	API Number: 045-09050	Status: PR	Insp. Status: PR
Producing Well				
Comment: plunger lift				
Facility ID: 273556	Type: WELL	API Number: 045-10260	Status: PR	Insp. Status: PR
Producing Well				
Comment: plunger lift				
Facility ID: 273557	Type: WELL	API Number: 045-10261	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): Y

Comment: **Could not verify pilot light was on.**

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? _____ 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? Pass 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

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
Berms	Pass	Culverts	Pass			
Compaction	Pass	Compaction	Pass			

S/U/V: _____ Corrective Date: _____

Comment: Snow cover limited inspection.

CA: _____

Pits: NO SURFACE INDICATION OF PIT