

**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:

01/17/2014

Document Number:

670201165

Overall Inspection:

Satisfactory**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection <input type="checkbox"/>
	274668	335308	BURGER, CRAIG	2A Doc Num: _____

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

Compliance Summary:QtrQtr: NWSE Sec: 26 Twp: 6S Range: 93W**Inspector Comment:****Related Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status	
270232	WELL	PR	03/11/2004	GW	045-09498	BENZEL 26-7C (J26NW)	PR	<input checked="" type="checkbox"/>
270233	WELL	PR	03/20/2004	GW	045-09497	BENZEL 26-10B (J26NW)	PR	<input checked="" type="checkbox"/>
274664	WELL	PR	08/13/2005	GW	045-13374	GMU 26-14B (J26NW)	PR	<input checked="" type="checkbox"/>
274665	WELL	PR	08/02/2005	GW	045-13373	GMU 26-12A (J26NW)	PR	<input checked="" type="checkbox"/>
274666	WELL	PR	08/06/2005	GW	045-13372	GMU 26-11C (J26NW)	PR	<input checked="" type="checkbox"/>
274667	WELL	PR	08/11/2005	GW	045-13371	GMU 26-14A (J26NW)	PR	<input checked="" type="checkbox"/>
274668	WELL	PR	07/31/2005	GW	045-13370	GMU 26-5D (J26NW)	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

Signs/Marker:				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
BATTERY	Satisfactory	Sign at separator for GMU-26-5D has wrong API #. Should be 045-13370 not 045-10948.		
TANK LABELS/PLACARDS	Satisfactory			
WELLHEAD	Satisfactory	Signs need 1/4 1/4 section. See compliance schedule COGCC document number #2369022.		

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
Gathering Line	1	Satisfactory			
Plunger Lift	7	Satisfactory			
Bird Protectors	3	Satisfactory			
Vertical Heated Separator	7	Satisfactory			
Emission Control Device	1	Satisfactory			
Gas Meter Run	1	Satisfactory			
Deadman # & Marked	6	Satisfactory			

Facilities:		<input type="checkbox"/> New Tank		Tank ID: _____	
Contents	#	Capacity	Type	SE GPS	
METHANOL	1	<50 BBLS	STEEL AST	,	
S/U/V:	Satisfactory		Comment: same berm as 500 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	500 BBLS	HEATED STEEL AST	39.494860, -107.742440	
S/U/V:	Satisfactory		Comment:		
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	
Metal	Adequate	Walls Sufficient	Base Sufficient	Adequate	
Corrective Action				Corrective Date	
Comment					

Venting:				
Yes/No	Comment			
NO				

Flaring:				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	
Ignitor/Combustor	Satisfactory			

Predrill

Location ID: 274668

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: 270232 Type: WELL API Number: 045-09498 Status: PR Insp. Status: PR

Producing Well

Comment: plunger lift

Facility ID: 270233 Type: WELL API Number: 045-09497 Status: PR Insp. Status: PR

Producing Well

Comment: plunger lift

Facility ID: 274664 Type: WELL API Number: 045-13374 Status: PR Insp. Status: PR

Producing Well

Comment: plunger lift

Facility ID: 274665 Type: WELL API Number: 045-13373 Status: PR Insp. Status: PR

Producing Well

Comment: plunger lift

Facility ID: 274666 Type: WELL API Number: 045-13372 Status: PR Insp. Status: PR

Producing Well

Comment: plunger lift

Facility ID: 274667 Type: WELL API Number: 045-13371 Status: PR Insp. Status: PR

Producing Well

Comment: plunger lift

Facility ID: 274668 Type: WELL API Number: 045-13370 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: _____

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: 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? Pass CM _____
 CA _____ CA Date _____

1003b. Area no longer in use? Pass 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 ☐

Inspector Name: BURGER, CRAIG

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: <u>Satisfactory</u> Corrective Date: _____						
Comment: Snow cover limited inspection.						
CA: _____						
Pits: <input type="checkbox"/> NO SURFACE INDICATION OF PIT						