

**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:

01/17/2014

Document Number:

663902675

Overall Inspection:

Satisfactory**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	335435	335435	LONGWORTH, MIKE	<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
Moss, Brad	(970) 285-9377	Brad.Moss@WPXEnergy.com	Production foreman
Gardner, Michael	970/285-9377 ext. 2760	Michael.Gardner@WPXEnergy.com	Principal Environmental Specialist
Kellerby, Shaun		shaun.kellerby@state.co.us	

Compliance Summary:

QtrQtr:	<u>NENE</u>	Sec:	<u>33</u>	Twp:	<u>6S</u>	Range:	<u>96W</u>
Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Unsatisfactory	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
04/24/2013	663800926			Unsatisfactory	I		No

Inspector Comment:

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Related Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status	
262081	WELL	PR	10/19/2002	GW	045-07999	WILLIAMS GM 217-33	PR	<input checked="" type="checkbox"/>
262212	WELL	PR	10/19/2002	GW	045-08007	WILLIAMS GM 12-34	PR	<input checked="" type="checkbox"/>
262221	WELL	PR	10/19/2002	GW	045-08009	WILLIAMS GM 218-33	PR	<input checked="" type="checkbox"/>
298447	WELL	PR	05/31/2009	GW	045-17204	WILLIAMS GM 432-33	PR	<input checked="" type="checkbox"/>
298448	WELL	PR	09/22/2008	GW	045-17205	WILLIAMS GM 442-33	PR	<input checked="" type="checkbox"/>
298449	WELL	PR	09/22/2008	GW	045-17206	WILLIAMS GM 441-33	PR	<input checked="" type="checkbox"/>
298450	WELL	PR	09/22/2008	GW	045-17207	WILLIAMS GM 532-33	PR	<input checked="" type="checkbox"/>
298451	WELL	PR	09/22/2008	GW	045-17208	WILLIAMS GM 342-33	PR	<input checked="" type="checkbox"/>
298452	WELL	PR	09/22/2008	GW	045-17209	WILLIAMS GM 332-33	PR	<input checked="" type="checkbox"/>
298453	WELL	PR	06/03/2009	GW	045-17210	WILLIAMS GM 411-34	PR	<input checked="" type="checkbox"/>
298625	WELL	PR	09/26/2008	GW	045-17302	WILLIAMS GM 341-33	PR	<input checked="" type="checkbox"/>

Equipment:Location Inventory

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Inspector Name: LONGWORTH, MIKE

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

Lease Road:				
Type	Satisfactory/Unsatisfactory	comment	Corrective Action	Date
Access	Satisfactory	Continue road maintenance		

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: _____

Good Housekeeping:				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
TRASH	Satisfactory	Trash removed since last inspection doc# 663800926		

Spills:				
Type	Area	Volume	Corrective action	CA Date
<input type="checkbox"/> Multiple Spills and Releases?				

Fencing/:				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
WELLHEAD	Satisfactory			
TANK BATTERY	Satisfactory			
SEPARATOR	Satisfactory			

Equipment:					
Type	#	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
Bird Protectors	6	Satisfactory			
Horizontal Heated Separator	12	Satisfactory			
Plunger Lift	11	Satisfactory			

Inspector Name: LONGWORTH, MIKE

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
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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
Comment	

Facilities:		<input type="checkbox"/> New Tank	Tank ID: _____	
Contents	#	Capacity	Type	SE GPS
CONDENSATE	3	300 BBLS	STEEL AST	,
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

Corrective Action	Corrective Date
Comment	

Venting:		
Yes/No	Comment	
YES	Bradens venting	

Flaring:				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date

Predrill

Location ID: 335435

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: 262081 Type: WELL API Number: 045-07999 Status: PR Insp. Status: PR

Producing Well

Comment: Producing well

Facility ID: 262212 Type: WELL API Number: 045-08007 Status: PR Insp. Status: PR

Producing Well

Comment: Producing well

Facility ID: 262221 Type: WELL API Number: 045-08009 Status: PR Insp. Status: PR

Producing Well

Comment: Producing well

Facility ID: 298447 Type: WELL API Number: 045-17204 Status: PR Insp. Status: PR

Producing Well

Comment: Producing well

Facility ID: 298448 Type: WELL API Number: 045-17205 Status: PR Insp. Status: PR

Producing Well

Comment: Producing well

Facility ID: 298449 Type: WELL API Number: 045-17206 Status: PR Insp. Status: PR

Producing Well

Comment: Producing well

Facility ID: 298450 Type: WELL API Number: 045-17207 Status: PR Insp. Status: PR

Producing Well

Comment: Producing well

Facility ID: 298451 Type: WELL API Number: 045-17208 Status: PR Insp. Status: PR

Producing Well

Comment: Producing well

Facility ID: 298452 Type: WELL API Number: 045-17209 Status: PR Insp. Status: PR

Producing Well

Comment: Producing well

Facility ID: 298453 Type: WELL API Number: 045-17210 Status: PR Insp. Status: PR

Producing Well

Comment: Producing well

Facility ID: 298625 Type: WELL API Number: 045-17302 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 _____

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

Field Parameters:

Inspector Name: LONGWORTH, MIKE

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? Pass 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? In Production areas stabilized ? Pass

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? Fail

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: Vegetation mostly weeds

Overall Interim Reclamation Fail

Final Reclamation/ Abandoned Location:

Date Final Reclamation Started: _____ Date Final Reclamation Completed: _____

Final Land Use: _____

Inspector Name: LONGWORTH, MIKE

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
Gravel	Fail	Culverts	Pass			
Compaction	Pass	Compaction	Pass			
		Gravel	Fail			
Seeding		Ditches	Pass			

S/U/V: Satisfactory

Corrective Date:

Comment:

CA:

Pits: ☐ NO SURFACE INDICATION OF PIT