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| 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 |
| FIELD INSPECTION FORM | | | Inspection Date: <u>02/20/2014</u> Document Number: <u>663902810</u> Overall Inspection: <u>Satisfactory</u> |
| Location Identifier: _____ Facility ID: <u>334646</u> Loc ID: <u>334646</u> Inspector Name: <u>LONGWORTH, MIKE</u> On-Site Inspection: <input type="checkbox"/> 2A Doc Num: _____ | | | |

Operator Information:

OGCC Operator Number: _____

Name of Operator: WPX ENERGY ROCKY MOUNTAIN LLC

Address: 1001 17TH STREET - SUITE #1200

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 |
|------------------|------------------------|-------------------------------|------------------------------------|
| Kellerby, Shaun | | shaun.kellerby@state.co.us | |
| 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 |

Compliance Summary:

QtrQtr: NWSW Sec: 12 Twp: 7S Range: 96W

Inspector Comment:

Related Facilities:

| Facility ID | Type | Status | Status Date | Well Class | API Num | Facility Name | Insp Status | |
|-------------|------|--------|-------------|------------|-----------|------------------|-------------|-------------------------------------|
| 264951 | WELL | PR | 09/13/2002 | GW | 045-08966 | BORUCH GM 313-12 | PR | <input checked="" type="checkbox"/> |
| 264953 | WELL | PR | 09/13/2002 | OW | 045-08965 | BORUCH GM 14-12 | PR | <input checked="" type="checkbox"/> |
| 264954 | WELL | PR | 03/10/2003 | OW | 045-08967 | RADER GM 23-12 | PR | <input checked="" type="checkbox"/> |
| 279045 | WELL | PR | 04/21/2006 | GW | 045-10979 | BORUCH GM 414-12 | PR | <input checked="" type="checkbox"/> |
| 279046 | WELL | PR | 04/29/2006 | GW | 045-10980 | BORUCH GM 513-12 | PR | <input checked="" type="checkbox"/> |
| 279104 | WELL | PR | 04/19/2006 | GW | 045-10978 | BORUCH GM 413-12 | PR | <input checked="" type="checkbox"/> |
| 280511 | WELL | PR | 04/19/2006 | GW | 045-11264 | BORUCH GM 423-12 | PR | <input checked="" type="checkbox"/> |
| 293567 | WELL | PR | 06/29/2008 | GW | 045-15040 | BUSH GM 323-12 | PR | <input checked="" type="checkbox"/> |
| 293699 | WELL | PR | 01/31/2009 | GW | 045-15110 | BUSH GM 523-12 | PR | <input checked="" type="checkbox"/> |
| 293700 | WELL | PR | 06/30/2008 | GW | 045-15111 | BUSH GM 524-12 | 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

Lease Road:

| Type | Satisfactory/Unsatisfactory | comment | Corrective Action | Date |
|--------|-----------------------------|---------|-------------------|------|
| Access | Satisfactory | | | |

Signs/Marker:

| Type | Satisfactory/Unsatisfactory | Comment | Corrective Action | CA Date |
|----------------------|-----------------------------|---------|-------------------|---------|
| BATTERY | Satisfactory | | | |
| WELLHEAD | 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 |
|------|------|--------|-------------------|---------|
|------|------|--------|-------------------|---------|

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 |
|-----------------------------|----|-----------------------------|---------|-------------------|---------|
| Plunger Lift | 10 | Satisfactory | | | |
| Horizontal Heated Separator | 10 | Satisfactory | | | |
| Bird Protectors | 6 | Satisfactory | | | |

| | | | | | |
|------------------------|--------------|-----------------------------------|---------------------|----------------------|--|
| Facilities: | | <input type="checkbox"/> New Tank | Tank ID: _____ | | |
| Contents | # | Capacity | Type | SE GPS | |
| CONDENSATE | 1 | 300 BBLS | STEEL AST | 39.449330,108.065520 | |
| 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 | | | | | |

| | | | | | |
|------------------------|--------------|-----------------------------------|---------------------|------------------|--|
| 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: | |
| <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 | | | | | |

| | | | | |
|-----------------|-----------------------------|---------|-------------------|---------|
| Venting: | | | | |
| Yes/No | | Comment | | |
| | | | | |
| Flaring: | | | | |
| Type | Satisfactory/Unsatisfactory | Comment | Corrective Action | CA Date |
| | | | | |

Predrill

Location ID: 334646

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: 264951 Type: WELL API Number: 045-08966 Status: PR Insp. Status: PR

Producing Well

Comment: Producing well

Facility ID: 264953 Type: WELL API Number: 045-08965 Status: PR Insp. Status: PR

Producing Well

Comment: Producing well

Facility ID: 264954 Type: WELL API Number: 045-08967 Status: PR Insp. Status: PR

Producing Well

Comment: Producing well

| | | | | |
|-------------------------|------------|-----------------------|------------|------------------|
| Facility ID: 279045 | Type: WELL | API Number: 045-10979 | Status: PR | Insp. Status: PR |
| Producing Well | | | | |
| Comment: Producing well | | | | |
| Facility ID: 279046 | Type: WELL | API Number: 045-10980 | Status: PR | Insp. Status: PR |
| Producing Well | | | | |
| Comment: Producing well | | | | |
| Facility ID: 279104 | Type: WELL | API Number: 045-10978 | Status: PR | Insp. Status: PR |
| Producing Well | | | | |
| Comment: Producing well | | | | |
| Facility ID: 280511 | Type: WELL | API Number: 045-11264 | Status: PR | Insp. Status: PR |
| Producing Well | | | | |
| Comment: Producing well | | | | |
| Facility ID: 293567 | Type: WELL | API Number: 045-15040 | Status: PR | Insp. Status: PR |
| Producing Well | | | | |
| Comment: Producing well | | | | |
| Facility ID: 293699 | Type: WELL | API Number: 045-15110 | Status: PR | Insp. Status: PR |
| Producing Well | | | | |
| Comment: Producing well | | | | |
| Facility ID: 293700 | Type: WELL | API Number: 045-15111 | 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:

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

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? Pass 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? Pass

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? In

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 is covering reclaim areas well.**

Overall Interim Reclamation In Process

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 _____

Inspector Name: LONGWORTH, MIKE

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 | Compaction | Pass | | | |
| Compaction | Pass | Culverts | Pass | | | |
| Ditches | Pass | Ditches | Pass | | | |
| Seeding | Pass | | | | | |
| Gravel | Pass | Gravel | Pass | | | |

S/U/V: Satisfactory Corrective Date: _____

Comment: _____

CA: _____

Pits: NO SURFACE INDICATION OF PIT