

Inspector Name: Maclaren, Joe

**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
----	----	----	----

Inspection Date:

03/26/2014

Document Number:

674600152

Overall Inspection:

Unsatisfactory**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection
	215328	325746	Maclaren, Joe	<input type="checkbox"/> 2A Doc Num: _____

Operator Information:

OGCC Operator Number:

Name of Operator: XTO ENERGY INCAddress: 382 CR 3100City: AZTEC State: NM Zip: 87410☐ 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
Kardos, Kelly		kelly_kardos@xtoenergy.com	Piceance
Hixon, Logan	505-386-8018	logan_hixon@xtoenergy.com	EH&S Technician
McDanial, James		james_mcdanial@xtoenergy.com	
Harrison, Lyndon		lyndon_harrison@xtoenergy.com	
Percell, Bob	970-759-2277	bob_percell@xtoenergy.com	Production Foreman

Compliance Summary:QtrQtr: SENE Sec: 2 Twp: 32N Range: 7W

Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Unsatisfactory	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
11/27/2006	200107624	PR	PR	Satisfactory		Pass	No
10/12/2005	200080350	PR	PR	Satisfactory		Pass	No
11/17/2003	200049347	PR	PR	Satisfactory		Pass	No
10/22/2002	200032260	PR	PR	Satisfactory		Pass	No
08/08/2000	200010106	PR	PR	Satisfactory		Pass	No
05/18/2000	200006906	BH	PR	Unsatisfactory		Fail	Yes
12/06/1999	200003228	ID	TA	Satisfactory		Pass	No
02/16/1999	500148844	PR	PR			Pass	No
09/18/1998	500148843	PR	PR			Pass	No
09/18/1998	500148842	ID	TA			Pass	No
02/10/1997	500148841	PR	PR			Pass	No
06/20/1995	500148840	PR	PR				No

Inspector Comment:

Inspector Name: Maclaren, Joe

The overall inspection at this location has been determined as Unsatisfactory/ Action required. There is a significant volume of standing water in the tank berm. A white precipitant ring can be observed in the berm/ tank bottom that is an indication past event(s). The water needs to be removed within 24 hours, or "as immediately as practicable". A corrective action deadline of 30 days has been set to confirm tank and water line integrity. If the determination made confirms the source as a produced water line or tank leak, a Form 19 (spill report) needs to be filed. Reporting is required for a spill >1 bbl outside containment or >5 bbl inside containment per rule 906b. The tank/ water line should be repaired or replaced as required. Inspector requests a form 42 when corrective actions have been completed. Pictures are attached.

Related Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status	
215328	WELL	PR	12/14/1997	GW	067-06933	HENRY 2-2	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

Emergency Contact Number: (S/U/V) Satisfactory

Corrective Date: _____

Comment: _____

Corrective Action: _____

Spills:

Type	Area	Volume	Corrective action	CA Date
Produced Water	Tank		Remove produced water from berm area.	03/29/2014

☐ Multiple Spills and Releases?

Fencing/:

Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
PUMP JACK	Satisfactory	Stock Panels		
TANK BATTERY	Satisfactory	Welded tubing		

Equipment:

Type	#	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
Vertical Heated Separator	1	Satisfactory			
Ancillary equipment	1	Satisfactory	Chemical injection system		
Pump Jack	1	Satisfactory			
Bird Protectors	2	Satisfactory			
Prime Mover	1	Satisfactory			
Ancillary equipment	1	Satisfactory	Water transfer pump		
Deadman # & Marked	4	Satisfactory			
Gas Meter Run	1	Satisfactory			
Flow Line	1	Satisfactory			

Inspector Name: Maclaren, Joe

Facilities:		<input type="checkbox"/> New Tank		Tank ID: _____	
Contents	#	Capacity	Type	SE GPS	
PRODUCED WATER	1	300 BBLS	STEEL AST	37.049050,-107.573320	
S/U/V:	Unsatisfactory		Comment: Probable produced water tank or pipeline leak. Excessive water observed in berm. Appears to be greater than 5 BBLS.		
Corrective Action:			Verify integrity of produced water pipeline/ manifold along with the produced water tank. Report spill using form 19 as required by rule 906b.		Corrective Date: 04/25/2014
Paint					
Condition	Adequate				
Other (Content)	_____				
Other (Capacity)	_____				
Other (Type)	_____				
Berms					
Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance	
Earth	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	

Predrill

Location ID: 215328

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: 215328 Type: WELL API Number: 067-06933 Status: PR Insp. Status: PR

Producing Well

Comment: PR

Environmental**Spills/Releases:**

Type of Spill: _____ Description: _____ Estimated Spill Volume: _____

Comment: _____

Corrective Action: _____ Date: _____

Reportable: _____ GPS: Lat _____ Long _____

Inspector Name: Maclaren, Joe

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? _____

1003d. Drilling pit closed? Pass Subsidence over on drill pit? Pass

Cuttings management: _____

1003e. Areas no longer needed for drilling or subsequent operations for have been re-vegetated to 80% of pre-existing? Pass

Production areas have been stabilized? Pass Segregated soils have been replaced? Pass

RESTORATION AND REVEGETATION

Cropland

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

Non-Cropland

Top soil replaced Pass Recontoured Pass 80% Revegetation Pass

1003 f. Weeds Noxious weeds? _____ P _____

Inspector Name: Maclaren, Joe

Comment: _____

Overall Interim Reclamation Pass

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
		Culverts	Pass			
				MHSP	Pass	
Gravel	Pass	Gravel	Pass			
Compaction	Pass	Compaction	Pass			

S/U/V: Satisfactory

Corrective Date: _____

Comment: **Additional stormwater BMP's may be needed along the steep slope/ berm area on the NW side of the produced water tank.**

CA: _____

Pits: ☐ NO SURFACE INDICATION OF PIT

Attached Documents

You can go to COGCC Images (<https://cogcc.state.co.us/weblink/>) and search by document number:

Document Num	Description	URL
674600158	067-06933 Standing water in berm 1 of 2	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3310260
674600159	067-06933 Standing water in bern 2 of 2	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3310261
674600160	067-06933 Precipitant staining on tank bottom	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3310262