

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:
05/02/2014

Document Number:
663903110

Overall Inspection:
SATISFACTORY

FIELD INSPECTION FORM

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	<u>335924</u>	<u>335924</u>	<u>LONGWORTH, MIKE</u>	<input type="checkbox"/>	

Operator Information:

OGCC Operator Number:	<u>96850</u>
Name of Operator:	<u>WPX ENERGY ROCKY MOUNTAIN LLC</u>
Address:	<u>1001 17TH STREET - SUITE #1200</u>
City:	<u>DENVER</u> State: <u>CO</u> Zip: <u>80202</u>

- 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	
Gardner, Michael	970/285-9377 ext. 2760	Michael.Gardner@WPXEnerg y.com	Principal Environmental Specialist
Moss, Brad	(970) 285-9377	Brad.Moss@WPXEnerg.com	Production foreman

Compliance Summary:

QtrQtr:	<u>SWSE</u>	Sec:	<u>16</u>	Twp:	<u>5S</u>	Range:	<u>97W</u>
Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Action Required	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
06/21/2013	663801167			ACTION REQUIRED	F		No

Inspector Comment:

Related Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status	
292776	WELL	PR	01/08/2009	GW	045-14767	CHEVRON TR 34-16-597	PR	<input checked="" type="checkbox"/>
292794	WELL	PR	01/08/2009	GW	045-14774	CHEVRON TR 434-16-597	PR	<input checked="" type="checkbox"/>
292795	WELL	PR	01/08/2009	GW	045-14773	CHEVRON TR 433-16-597	PR	<input checked="" type="checkbox"/>
292796	WELL	PR	01/08/2009	GW	045-14772	CHEVRON TR 334-16-597	PR	<input checked="" type="checkbox"/>
292797	WELL	PR	01/08/2009	GW	045-14771	CHEVRON TR 533-16-597	PR	<input checked="" type="checkbox"/>
292798	WELL	PR	01/08/2009	GW	045-14770	CHEVRON TR 33-16-597	PR	<input checked="" type="checkbox"/>
292799	WELL	PR	01/08/2009	GW	045-14769	CHEVRON TR 534-16-597	PR	<input checked="" type="checkbox"/>
292800	WELL	PR	01/08/2009	GW	045-14768	CHEVRON TR 343-16-597	PR	<input checked="" type="checkbox"/>

293727	WELL	PR	01/08/2009	GW	045-15121	CHEVRON TR 331-21-597	PR	<input checked="" type="checkbox"/>
293728	WELL	PR	01/08/2009	GW	045-15122	CHEVRON TR 431-21-597	PR	<input checked="" type="checkbox"/>
414585	PIT	AC	04/19/2010		-	CHEVRON TR 34-16-597 PAD	AC	<input 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/Action Required	comment	Corrective Action	Date
Access	SATISFACTORY	Road are being maintained.		

Signs/Marker:

Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
TANK LABELS/PLACARDS	SATISFACTORY			
CONTAINERS	SATISFACTORY			
WELLHEAD	SATISFACTORY			
BATTERY	SATISFACTORY			

Emergency Contact Number (S/A/V): SATISFACTORY

Corrective Date: _____

Comment: _____

Corrective Action: _____

Spills:

Type	Area	Volume	Corrective action	CA Date
	Tank	<= 5 bbls	Clean up spill at over flown catch pan on NW condensate tank.	05/03/2014

Multiple Spills and Releases?

Fencing/:

Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
PIT	SATISFACTORY			
SEPARATOR	SATISFACTORY			
TANK BATTERY	SATISFACTORY			
WELLHEAD	SATISFACTORY			

Equipment:					
Type	#	Satisfactory/Action Required	Comment	Corrective Action	CA Date
Bird Protectors	8	SATISFACTORY			
Ancillary equipment	2	SATISFACTORY	Chemical containers at wells		
Horizontal Heated Separator	14	SATISFACTORY			
Plunger Lift	10	SATISFACTORY			

Facilities: New Tank Tank ID: _____

Contents	#	Capacity	Type	SE GPS
METHANOL	1	<50 BBLS	STEEL AST	,

S/A/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: New Tank Tank ID: _____

Contents	#	Capacity	Type	SE GPS
CONDENSATE	3	400 BBLS	STEEL AST	,

S/A/V: **ACTION REQUIRED** Comment: **NW tank catch pan is full and overflowing**

Corrective Action: **Keep catch pans free of fluids** Corrective Date: **05/03/2014**

Paint

Condition	Adequate
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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

Flaring:				
Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date

Predrill

Location ID: 335924

Site Preparation:

Lease Road Adeq.: _____ Pads: _____ Soil Stockpile: _____

S/AV: _____

Corrective Action: _____ Date: _____ CDP Num.: _____

Form 2A COAs:

S/AV: _____ **Comment:** _____

CA: _____ **Date:** _____

Wildlife BMPs:

S/AV: _____ **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: 292776 Type: WELL API Number: 045-14767 Status: PR Insp. Status: PR

Producing Well

Comment: Producing well

Facility ID: 292794 Type: WELL API Number: 045-14774 Status: PR Insp. Status: PR

Producing Well

Comment: Producing well

Facility ID: 292795	Type: WELL	API Number: 045-14773	Status: PR	Insp. Status: PR
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Producing Well

Comment: Producing well

Facility ID: 292796	Type: WELL	API Number: 045-14772	Status: PR	Insp. Status: PR
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Producing Well

Comment: Producing well

Facility ID: 292797	Type: WELL	API Number: 045-14771	Status: PR	Insp. Status: PR
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Producing Well

Comment: Producing well

Facility ID: 292798	Type: WELL	API Number: 045-14770	Status: PR	Insp. Status: PR
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Producing Well

Comment: Producing well

Facility ID: 292799	Type: WELL	API Number: 045-14769	Status: PR	Insp. Status: PR
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Producing Well

Comment: Producing well

Facility ID: 292800	Type: WELL	API Number: 045-14768	Status: PR	Insp. Status: PR
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Producing Well

Comment: Producing well

Facility ID: 293727	Type: WELL	API Number: 045-15121	Status: PR	Insp. Status: PR
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Producing Well

Comment: Producing well

Facility ID: 293728	Type: WELL	API Number: 045-15122	Status: PR	Insp. Status: PR
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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:

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? _____ CM _____

CA _____ CA Date _____

Waste Material Onsite? _____ CM _____

CA _____ CA Date _____

Unused or unneeded equipment onsite? _____ 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? _____ CM _____

CA _____ CA Date _____

1003b. Area no longer in use? _____ Production areas stabilized ? _____

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? _____

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: _____

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
Ditches	Pass	Drains	Pass			
Berms	Pass	Compaction	Pass	MHSP	Pass	
Compaction	Pass	Culverts	Pass			
Seeding	Fail					
Gravel	Pass	Gravel	Pass			

S/A/V: SATISFACTOR Y Corrective Date: _____

Comment: _____

CA: _____

Pits: NO SURFACE INDICATION OF PIT

Permit:	Facility ID	Permit Num	Expiration Date
	414585	1631118	
	414585	1631118	

COGCC Comments		
Comment	User	Date
Conductor closed from prior inspection. doc # 663801167	longworm	05/02/2014