

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:
05/15/2014

Document Number:
663903199

Overall Inspection:
SATISFACTORY

FIELD INSPECTION FORM

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	<u>335200</u>	<u>335200</u>	<u>LONGWORTH, MIKE</u>	<input type="checkbox"/>	

Operator Information:

OGCC Operator Number:	<u>100185</u>
Name of Operator:	<u>ENCANA OIL & GAS (USA) INC</u>
Address:	<u>370 17TH ST STE 1700</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
Insp., General	970-285-2665	cogcc.inspections@encana.com	
Kellerby, Shaun		shaun.kellerby@state.co.us	

Compliance Summary:

QtrQtr:	<u>NENW</u>	Sec:	<u>28</u>	Twp:	<u>6S</u>	Range:	<u>96W</u>
Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Action Required	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
01/22/2014	663902681			SATISFACTORY Y	I		No

Inspector Comment:

Related Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status	
252	WELL	PR	03/27/2009	GW	045-15460	N. PARACHUTE MF02B C28 696	PR	<input checked="" type="checkbox"/>
253	WELL	PR	04/17/2009	GW	045-15461	N. PARACHUTE MF01A C28 696	PR	<input checked="" type="checkbox"/>
254	WELL	PR	04/17/2009	GW	045-15462	N. PARACHUTE MF01D C28 696	PR	<input checked="" type="checkbox"/>
255	WELL	PR	04/30/2009	GW	045-15463	N. PARACHUTE MF01C C28 696	PR	<input checked="" type="checkbox"/>
256	WELL	PR	03/31/2009	GW	045-15464	N. PARACHUTE MF02A C28 696	PR	<input checked="" type="checkbox"/>
258	WELL	PR	01/31/2009	GW	045-15465	N.PARACHUTE MF02D C28 696	PR	<input checked="" type="checkbox"/>
259	WELL	PR	04/14/2009	GW	045-15466	N. PARACHUTE MF01B C28 696	PR	<input checked="" type="checkbox"/>
260	WELL	PR	01/20/2009	GW	045-15467	N. PARACHUTE MF02C C28 696	PR	<input checked="" type="checkbox"/>
291912	WELL	PR	04/14/2009	GW	045-14553	N. PARACHUTE MF15A-21 C28 69	PR	<input checked="" type="checkbox"/>

291915	WELL	PR	01/19/2009	GW	045-14552	N. PARACHUTE MF10A-21C28 696	PR	X
291916	WELL	PR	04/15/2009	GW	045-14551	N. PARACHUTE MF10B-21C28 696	PR	X
291918	WELL	PR	04/17/2009	GW	045-14550	N. PARACHUTE MF10C-21 C28 69	PR	X
291920	WELL	PR	04/30/2009	GW	045-14549	N. PARACHUTE MF10D-21 C28 69	PR	X
292039	WELL	PR	04/14/2009	GW	045-14554	N. PARACHUTE MF15B-21C28696	PR	X
293694	WELL	PR	04/17/2009	GW	045-15108	N. PARACHUTE MF15C-21 C28 69	PR	X
293695	WELL	PR	04/17/2009	GW	045-15109	N. PARACHUTE MF16C-21 C28 69	PR	X
425557	PIT		09/19/2011		-	C28 696		

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	ACTION REQUIRED	Outlet side of low water crossing is starting to wash away.	Repair and maintain road.	06/13/2014

Signs/Marker:

Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
CONTAINERS	SATISFACTORY			
BATTERY	ACTION REQUIRED	Sign can not be completely read due sign cover with dried up mud. Nearest county road is not listed.	Install sign to comply with rule 210.	05/23/2014
TANK LABELS/PLACARDS	SATISFACTORY	Tank is labeled Condensate. Labels are on back side of tank not visiable from entrance.		
WELLHEAD	SATISFACTORY			

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

Corrective Date: 05/21/2014

Comment: Number can not be read for mud on the sign

Corrective Action: Clean sign

Spills:

Type	Area	Volume	Corrective action	CA Date
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Multiple Spills and Releases?

Equipment:

Type	#	Satisfactory/Action Required	Comment	Corrective Action	CA Date
Plunger Lift	16	SATISFACTORY			

Facilities: New Tank Tank ID: _____

Contents	#	Capacity	Type	SE GPS	
CONDENSATE	1	<100 BBLS	STEEL AST	,	
S/A/V: SATISFACTORY	Comment:				
Corrective Action:				Corrective Date:	

Paint

Condition	
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					

Venting:

Yes/No	Comment

Flaring:

Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date

Predrill

Location ID: 335200

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: 252 Type: WELL API Number: 045-15460 Status: PR Insp. Status: PR

Producing Well

Comment: Producing well

Facility ID: 253 Type: WELL API Number: 045-15461 Status: PR Insp. Status: PR

Producing Well

Comment: Producing well

Facility ID: 254 Type: WELL API Number: 045-15462 Status: PR Insp. Status: PR

Producing Well

Comment: Producing well

Facility ID: 255	Type: WELL	API Number: 045-15463	Status: PR	Insp. Status: PR
Producing Well				
Comment: Producing well				
Facility ID: 256	Type: WELL	API Number: 045-15464	Status: PR	Insp. Status: PR
Producing Well				
Comment: Producing well				
Facility ID: 258	Type: WELL	API Number: 045-15465	Status: PR	Insp. Status: PR
Producing Well				
Comment: Producing well				
Facility ID: 259	Type: WELL	API Number: 045-15466	Status: PR	Insp. Status: PR
Producing Well				
Comment: Producing well				
Facility ID: 260	Type: WELL	API Number: 045-15467	Status: PR	Insp. Status: PR
Producing Well				
Comment: Producing well				
Facility ID: 291912	Type: WELL	API Number: 045-14553	Status: PR	Insp. Status: PR
Producing Well				
Comment: Producing well				
Facility ID: 291915	Type: WELL	API Number: 045-14552	Status: PR	Insp. Status: PR
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Comment: Producing well				
Facility ID: 291916	Type: WELL	API Number: 045-14551	Status: PR	Insp. Status: PR
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Facility ID: 291918	Type: WELL	API Number: 045-14550	Status: PR	Insp. Status: PR
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Facility ID: 291920	Type: WELL	API Number: 045-14549	Status: PR	Insp. Status: PR
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Comment: Producing well				
Facility ID: 292039	Type: WELL	API Number: 045-14554	Status: PR	Insp. Status: PR
Producing Well				
Comment: Producing well				
Facility ID: 293694	Type: WELL	API Number: 045-15108	Status: PR	Insp. Status: PR

Producing Well

Comment: Producing well

Facility ID: 293695 Type: WELL API Number: 045-15109 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? _____ 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
Slope Roughening	Pass					
Compaction	Pass	Culverts	Pass			
Check Dams	Pass					
Drains	Pass	Gravel	Pass			
Culverts	Pass	Ditches	Pass			
Gravel	Pass					
Seeding						

Inspector Name: LONGWORTH, MIKE

Rip Rap	Pass					
Berms	Pass	Compaction	Pass	MHSP	Pass	secondary containment

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

Comment: _____

CA: _____

Pits: NO SURFACE INDICATION OF PIT