

**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:

06/25/2014

Document Number:

668701674

Overall Inspection:

SATISFACTORY**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	433031	433035	HELGELAND, GARY	<input type="checkbox"/>	

**Operator Information:**OGCC Operator Number: 100185Name of Operator: ENCANA OIL & GAS (USA) INCAddress: 370 17TH ST STE 1700City: 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
J, D		cogcc.djinspections@encana.com	D J Basin

**Compliance Summary:**QtrQtr: SWSE Sec: 28 Twp: 2N Range: 66W

Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Action Required	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
03/04/2014	671101037	PR	PR	SATISFACTORY			No

**Inspector Comment:****Related Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status	
433031	WELL	PR	11/18/2013	OW	123-37428	Maier 4B-28H	PR	<input checked="" type="checkbox"/>
433032	WELL	PR	01/10/2014	LO	123-37429	Maier 4A-28H	PR	<input checked="" type="checkbox"/>

**Equipment:****Location Inventory**

Special Purpose Pits: _____	Drilling Pits: _____	Wells: <u>2</u>	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/A/V): \_\_\_\_\_

Corrective Date: \_\_\_\_\_

Comment: \_\_\_\_\_

Corrective Action: \_\_\_\_\_

**Spills:** \_\_\_\_\_

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Type	Area	Volume	Corrective action	CA Date					
<input type="checkbox"/> Multiple Spills and Releases?									
<b>Venting:</b>									
Yes/No		Comment							
<b>Flaring:</b>									
Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date					
<b>Predrill</b>									
Location ID: 433031									
<b>Site Preparation:</b>									
Lease Road Adeq.:		Pads:	Soil Stockpile:						
<b>S/A/V:</b>									
Corrective Action:		Date:	CDP Num.:						
<b>Form 2A COAs:</b>									
<b>S/A/V:</b>		<b>Comment:</b>							
<b>CA:</b>		<b>Date:</b>							
<b>Wildlife BMPs:</b>									
<b>S/A/V:</b>		<b>Comment:</b>							
<b>CA:</b>		<b>Date:</b>							
<b>Stormwater:</b>									
<b>Comment:</b>									
<b>Staking:</b>									
<b>On Site Inspection (305):</b>									
<b>Surface Owner Contact Information:</b>									
Name:		Address:							
Phone Number:		Cell Phone:							
<b>Operator Rep. Contact Information:</b>									
Landman Name:		Phone Number:							
Date Onsite Request Received:		Date of Rule 306 Consultation:							
Request LGD Attendance:									
<b>LGD Contact Information:</b>									
Name:		Phone Number:	Agreed to Attend:						
<b>Summary of Landowner Issues:</b>									
<b>Summary of Operator Response to Landowner Issues:</b>									
<b>Onsite Inspection Memorandum Summarizing Discussions at Inspection as Attachment:</b>									
<b>Facility</b>									
Facility ID:	433031	Type:	WELL	API Number:	123-37428	Status:	PR	Insp. Status:	PR

Facility ID: 433032 Type: WELL API Number: 123-37429 Status: PR Insp. Status: PR

**Producing Well**

Comment: Site located in cultivated field.

**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: DRY LAND

Comment:

1003a. Debris removed? Pass CM CA Date  
 Waste Material Onsite? Pass CM CA Date  
 Unused or unneeded equipment onsite? Pass CM CA Date  
 Pit, cellars, rat holes and other bores closed? Pass CM CA Date  
 Guy line anchors removed? Pass CM CA Date  
 Guy line anchors marked? CM CA Date

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

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1003c. Compacted areas have been cross ripped? Pass

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? In

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

#### RESTORATION AND REVEGETATION

##### Cropland

Top soil replaced Pass Recontoured Pass Perennial forage re-established In

##### Non-Cropland

Top soil replaced \_\_\_\_\_ Recontoured \_\_\_\_\_ 80% Revegetation \_\_\_\_\_

1003 f. Weeds Noxious weeds? P

Comment: Site located in cultivated field.

Overall Interim Reclamation In Process

#### Final Reclamation/ Abandoned Location:

Date Final Reclamation Started: \_\_\_\_\_ Date Final Reclamation Completed: \_\_\_\_\_

Final Land Use: DRY LAND

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	Pass	Gravel	Pass			

S/A/V: SATISFACTOR Corrective Date: \_\_\_\_\_

Y

Comment: \_\_\_\_\_

CA: \_\_\_\_\_

Pits: ☐ NO SURFACE INDICATION OF PIT