

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:
07/17/2014

Document Number:
675200241

Overall Inspection:
SATISFACTORY

FIELD INSPECTION FORM

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	<u>334336</u>	<u>334336</u>	<u>CONKLIN, CURTIS</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
, Encana		cogcc.inspections@encana.com	All Inspections
Kellerby, Shaun		shuan.kellerby@state.co.us	NW Supervisor

Compliance Summary:

QtrQtr: NENW Sec: 36 Twp: 7S Range: 93W

Inspector Comment:

Follow up inspection for DOC#670200791

Related Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status	
281698	WELL	PR	10/18/2005	GW	045-11495	SHIDELER 36-15A (C36W)	PR	<input checked="" type="checkbox"/>
281699	WELL	PR	10/18/2005	GW	045-11496	SHIDELER 36-14A (C36W)	PR	<input checked="" type="checkbox"/>
281700	WELL	PR	10/08/2008	GW	045-11497	SHIDELER FEDERAL 36-14C (C36W)	PR	<input checked="" type="checkbox"/>
299079	WELL	PR	11/02/2009	GW	045-17555	SHIDELER FEDERAL 36-15C2 (C36W)	PR	<input checked="" type="checkbox"/>
299080	WELL	PR	09/29/2009	GW	045-17556	SHIDELER 36-15B2 (C36W)	PR	<input checked="" type="checkbox"/>
299081	WELL	PR	11/01/2009	GW	045-17557	SHIDELER FEDERAL 36-15C1 (C36W)	PR	<input checked="" type="checkbox"/>
299082	WELL	PR	11/02/2009	GW	045-17558	SHIDELER FEDERAL 1-2B1 (C36W)	SI	<input checked="" type="checkbox"/>
299083	WELL	PR	11/02/2009	GW	045-17559	SHIDELER 36-10C (C36W)	PR	<input checked="" type="checkbox"/>
299084	WELL	PR	09/25/2009	GW	045-17560	SHIDELER 25-15C1	PR	<input checked="" type="checkbox"/>
299085	WELL	PR	11/01/2009	GW	045-17561	SHIDELER 25-14C (C36W)	PR	<input checked="" type="checkbox"/>
299086	WELL	PR	11/02/2009	GW	045-17562	SHIDELER FEDERAL 1-2B2 (C36W)	PR	<input checked="" type="checkbox"/>
300695	WELL	PR	11/01/2009	GW	045-17976	SHIDELER 36-14B2 (C36W)	PR	<input checked="" type="checkbox"/>

300696	WELL	PR	11/01/2009	GW	045-17977	SHIDELER FEDERAL 1-4B2 (C36W)	PR	<input checked="" type="checkbox"/>
300697	WELL	PR	11/05/2009	GW	045-17978	SHIDELER FEDERAL 36-14C1(C36W)	PR	<input checked="" type="checkbox"/>
300698	WELL	PR	11/01/2009	GW	045-17979	SHIDELER FEDERAL 36-13C1(C36W)	PR	<input checked="" type="checkbox"/>
300699	WELL	PR	11/01/2009	GW	045-17980	SHIDELER FEDERAL 36-13C2(C36W)	PR	<input checked="" type="checkbox"/>
300700	WELL	PR	11/02/2009	GW	045-17981	SHIDELER FEDERAL 1-3B1 (C36W)	PR	<input checked="" type="checkbox"/>
300701	WELL	PR	11/02/2009	GW	045-17982	SHIDELER FEDERFAL 1-3B2(C36W)	PR	<input checked="" type="checkbox"/>
300930	WELL	PR	11/01/2009	GW	045-18056	SHIDELER FEDERAL 36-13C3(C36W)	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/Action Required	comment	Corrective Action	Date
Access	SATISFACTORY			
Main	SATISFACTORY			

Signs/Marker:

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

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

Corrective Date: _____

Comment: _____

Corrective Action: _____

Spills:

Type	Area	Volume	Corrective action	CA Date
<input type="checkbox"/> Multiple Spills and Releases?				

Fencing/:

Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
LOCATION	SATISFACTORY	Wire fence		

Equipment:					
Type	#	Satisfactory/Action Required	Comment	Corrective Action	CA Date
Gathering Line	1	SATISFACTORY			
Plunger Lift	18	SATISFACTORY			
Horizontal Heated Separator	18	SATISFACTORY	No containment		
Gas Meter Run	1	SATISFACTORY			
Emission Control Device	1	SATISFACTORY	Not lit at time of inspection. Pumper on site.		
Bird Protectors	9	SATISFACTORY			

Facilities: New Tank Tank ID: _____

Contents	#	Capacity	Type	SE GPS
METHANOL	1	OTHER	STEEL AST	,

S/A/V: SATISFACTORY Comment: _____

Corrective Action: _____ Corrective Date: _____

Paint

Condition	Adequate
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Other (Content) _____

Other (Capacity) 24bbl _____

Other (Type) _____

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance

Corrective Action _____ Corrective Date _____

Comment **Same**

Facilities: New Tank Tank ID: _____

Contents	#	Capacity	Type	SE GPS
CONDENSATE	6	300 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 _____

Venting:	
Yes/No	Comment
NO	

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

Predrill

Location ID: 334336

Site Preparation:

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

S/A/V: _____

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

Form 2A COAs:

S/A/V: _____ **Comment:** _____

CA: _____ **Date:** _____

Wildlife BMPs:

S/A/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: 281698 Type: WELL API Number: 045-11495 Status: PR Insp. Status: PR

Producing Well

Comment: **PR**

Facility ID: 281699	Type: WELL	API Number: 045-11496	Status: PR	Insp. Status: PR
Producing Well				
Comment: PR				
Facility ID: 281700	Type: WELL	API Number: 045-11497	Status: PR	Insp. Status: PR
Producing Well				
Comment: PR				
Facility ID: 299079	Type: WELL	API Number: 045-17555	Status: PR	Insp. Status: PR
Producing Well				
Comment: PR				
Facility ID: 299080	Type: WELL	API Number: 045-17556	Status: PR	Insp. Status: PR
Producing Well				
Comment: PR				
Facility ID: 299081	Type: WELL	API Number: 045-17557	Status: PR	Insp. Status: PR
Producing Well				
Comment: PR				
Facility ID: 299082	Type: WELL	API Number: 045-17558	Status: PR	Insp. Status: SI
Idle Well				
Purpose: <input checked="" type="checkbox"/> Shut In <input type="checkbox"/> Temporarily Abandoned Reminder: _____				
S/A/V: SATISFACTORY CA Date: _____				
CA: _____				
Comment: _____				
Facility ID: 299083	Type: WELL	API Number: 045-17559	Status: PR	Insp. Status: PR
Producing Well				
Comment: PR				
Facility ID: 299084	Type: WELL	API Number: 045-17560	Status: PR	Insp. Status: PR
Producing Well				
Comment: PR				
Facility ID: 299085	Type: WELL	API Number: 045-17561	Status: PR	Insp. Status: PR
Producing Well				
Comment: PR				
Facility ID: 299086	Type: WELL	API Number: 045-17562	Status: PR	Insp. Status: PR
Producing Well				
Comment: PR				
Facility ID: 300695	Type: WELL	API Number: 045-17976	Status: PR	Insp. Status: PR
Producing Well				
Comment: PR				

Facility ID: <u>300696</u>	Type: <u>WELL</u>	API Number: <u>045-17977</u>	Status: <u>PR</u>	Insp. Status: <u>PR</u>
Producing Well				
Comment: <u>PR</u>				
Facility ID: <u>300697</u>	Type: <u>WELL</u>	API Number: <u>045-17978</u>	Status: <u>PR</u>	Insp. Status: <u>PR</u>
Producing Well				
Comment: <u>PR</u>				
Facility ID: <u>300698</u>	Type: <u>WELL</u>	API Number: <u>045-17979</u>	Status: <u>PR</u>	Insp. Status: <u>PR</u>
Producing Well				
Comment: <u>PR</u>				
Facility ID: <u>300699</u>	Type: <u>WELL</u>	API Number: <u>045-17980</u>	Status: <u>PR</u>	Insp. Status: <u>PR</u>
Producing Well				
Comment: <u>PR</u>				
Facility ID: <u>300700</u>	Type: <u>WELL</u>	API Number: <u>045-17981</u>	Status: <u>PR</u>	Insp. Status: <u>PR</u>
Producing Well				
Comment: <u>PR</u>				
Facility ID: <u>300701</u>	Type: <u>WELL</u>	API Number: <u>045-17982</u>	Status: <u>PR</u>	Insp. Status: <u>PR</u>
Producing Well				
Comment: <u>PR</u>				
Facility ID: <u>300930</u>	Type: <u>WELL</u>	API Number: <u>045-18056</u>	Status: <u>PR</u>	Insp. Status: <u>PR</u>
Producing Well				
Comment: <u>PR</u>				

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? Pass 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 Pass Recontoured Pass 80% Revegetation Pass

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 _____

Inspector Name: CONKLIN, CURTIS

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			
Gravel	Pass	Gravel	Pass			
Ditches	Pass	Ditches	Pass			
Compaction	Pass	Culverts	Pass			
Seeding	Pass					
Retention Ponds	Pass					

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

Comment: _____
 CA: _____

Pits: NO SURFACE INDICATION OF PIT

COGCC Comments

Comment	User	Date
Leaking containment has been resolved from inspection DOC#670200791.	conklinc	07/17/2014