

**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:

07/31/2014

Document Number:

668302123

Overall Inspection:

ACTION REQUIRED**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	433800	433796	JOHNSON, RANDELL	<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
House, Chris	303-774-3972	larry.house@encana.com	Strategic Projects Advisor
Group, Email		cogcc.djinspections@encana.com	Group Email

Compliance Summary:QtrQtr: NWNW Sec: 31 Twp: 1N Range: 65W**Inspector Comment:****Related Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status	
433795	WELL	DG	01/04/2014	LO	123-37784	Lochbuie 2E-31H D165	SI	<input checked="" type="checkbox"/>
433797	WELL	DG	01/18/2014	LO	123-37785	Lochbuie 2F-31H D165	SI	<input checked="" type="checkbox"/>
433798	WELL	DG	12/22/2013	LO	123-37786	Lochbuie 2D-31H D165	SI	<input checked="" type="checkbox"/>
433800	WELL	DG	11/08/2013	LO	123-37787	Lochbuie 2A-31H D165	SI	<input checked="" type="checkbox"/>
433801	WELL	DG	02/02/2014	LO	123-37788	Lochbuie 2G-31H D165	SI	<input checked="" type="checkbox"/>
433802	WELL	DG	11/27/2013	LO	123-37789	Lochbuie 2B-31H D165	SI	<input checked="" type="checkbox"/>
433803	WELL	DG	12/10/2013	LO	123-37790	Lochbuie 2C-31H D165	SI	<input checked="" type="checkbox"/>
434443	WELL	DG	02/13/2014	LO	123-38169	Lochbuie 2H-31H D165	SI	<input checked="" type="checkbox"/>

Equipment:**Location Inventory**

Special Purpose Pits: _____	Drilling Pits: _____	Wells: <u>8</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

Signs/Marker:				
Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
WELLHEAD	SATISFACTORY			
TANK LABELS/PLACARDS	ACTION REQUIRED	Farthest northeast steel production tank has an NFPA placard that has been defaced	Replace sign to comply with rule 210.	08/31/2014
TANK LABELS/PLACARDS	ACTION REQUIRED	Second fiberglass tank from the west has an NFPA placard that is detached and torn	Replace sign to comply with rule 210.	08/31/2014
BATTERY	SATISFACTORY			
TANK LABELS/PLACARDS	ACTION REQUIRED	Steel production tanks do not have the required contents or capacity signage	Install sign to comply with rule 210.	08/31/2014
TANK LABELS/PLACARDS	ACTION REQUIRED	Partially buried fiberglass tanks do not have the required contents or capacity signage	Install sign to comply with rule 210.	08/31/2014
CONTAINERS	ACTION REQUIRED	Chemical tank on battery location does not have the required contents of NFPA signage	Install sign to comply with rule 210.	08/31/2014

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
WELLHEAD	SATISFACTORY	Pipe and rod fencing		
SEPARATOR	SATISFACTORY	Chain-link fencing		
IGNITOR/COMBUST OR	SATISFACTORY	Chain-link fencing		
TANK BATTERY	SATISFACTORY	Chain-link fencing		

Equipment:				
Type	#	Satisfactory/Action Required	Comment	CA Date
Other	2	SATISFACTORY	VRU towers/scrubbers/vertical separators	

Inspector Name: JOHNSON, RANDELL

Horizontal Heated Separator	8	SATISFACTORY			
Gas Meter Run	8	SATISFACTORY	Operator check meters on outlets of separators		
Pig Station	1	SATISFACTORY			
Gas Meter Run	1	SATISFACTORY	Pipeline meter and meter run house		
Vertical Separator	1	SATISFACTORY			
VRU	6	SATISFACTORY			
Emission Control Device	8	SATISFACTORY			

Facilities: ☐ New Tank Tank ID: _____

Contents	#	Capacity	Type	SE GPS
OTHER	4	OTHER	PBV FIBERGLASS	40.011630,-104.709070

S/A/V: SATISFACTORY Comment: Contents and capacity unknown - no signage

Corrective Action: _____ Corrective Date: _____

Paint

Condition Adequate

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
OTHER	12	OTHER	STEEL AST	40.011630,-104.709070

S/A/V: SATISFACTORY Comment: Contents and capacity unknown - no signage

Corrective Action: _____ Corrective Date: _____

Paint

Condition Adequate

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: 433800

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: 433795 Type: WELL API Number: 123-37784 Status: DG Insp. Status: SI

Idle Well

Purpose: ☒ Shut In ☐ Temporarily Abandoned Reminder: _____
S/A/V: _____ CA Date: _____
CA: _____
Comment: **Producing intermittently**

Facility ID: 433797 Type: WELL API Number: 123-37785 Status: DG Insp. Status: SI

Idle Well

Purpose: ☒ Shut In ☐ Temporarily Abandoned Reminder: _____
S/A/V: _____ CA Date: _____
CA: _____
Comment: **Producing intermittently**

Facility ID: 433798 Type: WELL API Number: 123-37786 Status: DG Insp. Status: SI

Idle Well

Purpose: ☒ Shut In ☐ Temporarily Abandoned Reminder: _____
S/A/V: _____ CA Date: _____
CA: _____
Comment: **Producing intermittently**

Facility ID: 433800 Type: WELL API Number: 123-37787 Status: DG Insp. Status: SI

Idle Well

Purpose: ☒ Shut In ☐ Temporarily Abandoned Reminder: _____
S/A/V: _____ CA Date: _____
CA: _____
Comment: **Producing intermittently**

Facility ID: 433801 Type: WELL API Number: 123-37788 Status: DG Insp. Status: SI

Idle Well

Purpose: ☒ Shut In ☐ Temporarily Abandoned Reminder: _____
S/A/V: _____ CA Date: _____
CA: _____
Comment: **Producing intermittently**

Facility ID: 433802 Type: WELL API Number: 123-37789 Status: DG Insp. Status: SI

Idle Well

Purpose: ☒ Shut In ☐ Temporarily Abandoned Reminder: _____
S/A/V: _____ CA Date: _____
CA: _____
Comment: **Producing intermittently**

Facility ID: 433803 Type: WELL API Number: 123-37790 Status: DG Insp. Status: SI

Idle WellPurpose: ☒ Shut In ☐ Temporarily Abandoned Reminder: _____

S/A/V: _____ CA Date: _____

CA: _____

Comment: **Producing intermittently**

Facility ID: 434443 Type: WELL API Number: 123-38169 Status: DG Insp. Status: SI

Idle WellPurpose: ☒ Shut In ☐ Temporarily Abandoned Reminder: _____

S/A/V: _____ CA Date: _____

CA: _____

Comment: **Producing intermittently****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: IRRIGATED

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? Pass CM _____
 CA _____ CA Date _____
 Guy line anchors marked? _____ CM _____
 CA _____ CA Date _____

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

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? In

Production areas have been stabilized? In 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 In Process

Final Reclamation/ Abandoned Location:

Date Final Reclamation Started: _____ Date Final Reclamation Completed: _____

Final Land Use: IRRIGATED _____

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
Other	Pass	Other	Pass			Vegetation
Compaction	Pass	Compaction	Pass			

Inspector Name: JOHNSON, RANDELL

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

Comment: _____

CA: _____

Pits: ☒ NO SURFACE INDICATION OF PIT