

**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:

07/29/2014

Document Number:

673801226

Overall Inspection:

SATISFACTORY**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	433792	433787	Gomez, Jason	<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
Ferrell, LaDawn	(620) 672-3800	lferrell@profsecservices.com	All Inspections
Berlin, John		john.berlin@encana.com	

Compliance Summary:QtrQtr: SEnw Sec: 5 Twp: 2n Range: 67w**Inspector Comment:****Related Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
433788	WELL	DG	04/16/2014	LO	123-37777	VOGL-GEIST 2F-5H-F267	DG <input type="checkbox"/>
433789	WELL	DG	01/30/2014	LO	123-37778	VOGL-GEIST 2E-5H-F267	DG <input type="checkbox"/>
433790	WELL	DG	01/29/2014	LO	123-37779	VOGL-MCCOY 2F-5H-F267	DG <input type="checkbox"/>
433791	WELL	DG	01/25/2014	LO	123-37780	VOGL-MCCOY 2E-5H-F267	DG <input type="checkbox"/>
433792	WELL	DG	04/16/2014	LO	123-37781	VOGL-MCCOY 2H-5H-F267	DG <input checked="" type="checkbox"/>
433793	WELL	DG	01/31/2014	LO	123-37782	VOGL-MCCOY 2G-5H-F267	DG <input type="checkbox"/>
433794	WELL	DG	01/26/2014	LO	123-37783	VOGL-GEIST 2D-5H-F267	DG <input type="checkbox"/>

Equipment:**Location Inventory**

Special Purpose Pits: _____	Drilling Pits: _____	Wells: <u>7</u>	Production Pits: _____
Condensate Tanks: _____	Water Tanks: <u>8</u>	Separators: <u>7</u>	Electric Motors: _____
Gas or Diesel Motors: _____	Cavity Pumps: _____	LACT Unit: _____	Pump Jacks: <u>7</u>
Electric Generators: _____	Gas Pipeline: _____	Oil Pipeline: _____	Water Pipeline: _____
Gas Compressors: _____	VOC Combustor: <u>13</u>	Oil Tanks: <u>18</u>	Dehydrator Units: _____
Multi-Well Pits: _____	Pigging Station: _____	Flare: _____	Fuel Tanks: _____

Location

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

Corrective Date: _____

Comment: _____

Corrective Action: _____

Spills:

Type	Area	Volume	Corrective action	CA Date
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☐ Multiple Spills and Releases?**Venting:**

Yes/No

Comment

Flaring:

Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date

Predrill

Location ID: 433792

Site Preparation:

Lease Road Adeq.: SATISFACTORY

Pads: SATISFACTORY

Soil Stockpile: SATISFACTORY

S/A/V: SATISFACT

Corrective Action: _____

Date: _____

CDP Num.: _____

Form 2A COAs:

Group	User	Comment	Date
OGLA	youngr	The tank battery shall be constructed using a liner.	07/12/2013

S/A/V: _____ **Comment:** _____**CA:** _____**Date:** _____**Wildlife BMPs:****S/A/V:** _____ **Comment:** _____**CA:** _____**Date:** _____**Stormwater:**

Erosion BMPs	Present	Other BMPs	Present
DITCHES	Yes		

S/A/V: SATISFACTORY

Corrective Action: _____ Date: _____

Comments: Erosion BMPs: _____

Other BMPs: _____

Inspector Name: Gomez, Jason

BERMS	Yes		
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S/A/V: SATISFACTORY

Corrective Action: _____ Date: _____

Comments: Erosion BMPs: _____

Other BMPs: _____

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: 433792 Type: WELL API Number: 123-37781 Status: DG Insp. Status: DG

Complaint

Comment: 18# 200409898 18a#200409899

Well Stimulation

Stimulation Company: BWS Stimulation Type: HYDRAULIC FRAC

Other: _____

Observation:

Maximum Casing Recorded: 9500 PSI

Tubing: _____

Surface: _____

Intermediate: _____

Production: _____

Instantaneous Shut-In Pressure (ISIP) 9000

Bradenhead Psi: _____

Frac Flow Back: Fluid: _____ Gas: _____

Environmental

Spills/Releases:

Type of Spill: _____ Description: _____ Estimated Spill Volume: _____

Comment: _____

Corrective Action: _____ Date: _____

Reportable: _____ GPS: Lat _____ Long _____

Inspector Name: Gomez, Jason

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? _____ 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? _____

Inspector Name: Gomez, Jason

Comment: _____

Overall Interim Reclamation _____

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
Berms	Pass			MHSP	Pass	
Gravel	Pass	Gravel	Pass	VT	Pass	
Ditches	Pass			CM	Pass	

S/A/V: SATISFACTOR
Y _____

Corrective Date: _____

Comment: _____

CA: _____

Pits: ☐ NO SURFACE INDICATION OF PIT