

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:
09/02/2014

Document Number:
675200480

Overall Inspection:
SATISFACTORY

FIELD INSPECTION FORM

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	414939	414939	CONKLIN, CURTIS	<input type="checkbox"/>	

Operator Information:

OGCC Operator Number:	<u>96850</u>
Name of Operator:	<u>WPX ENERGY ROCKY MOUNTAIN LLC</u>
Address:	<u>1001 17TH STREET - SUITE #1200</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
Kellerby, Shaun		shuan.kellerby@state.co.us	NW Supervisor
Gardner, Michael	(970) 285-9377 ext. 2760	Michael.Gardner@WPXEnergy.com	
Moss, Brad	(970) 285-9377	Brad.Moss@WPXEnergy.com	

Compliance Summary:

QtrQtr:	<u>SENV</u>	Sec:	<u>11</u>	Twp:	<u>7S</u>	Range:	<u>95W</u>
Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Action Required	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
01/07/2014	663902622			SATISFACTORY			No

Inspector Comment:

Related Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status	
414961	WELL	PR	12/01/2010	GW	045-18943	GOLDSBOROUGH PA 542-10	PR	<input checked="" type="checkbox"/>
414972	WELL	PR	10/19/2011	GW	045-18944	GOLDSBOROUGH PA 421-11	PR	<input checked="" type="checkbox"/>
414973	WELL	PR	12/01/2010	GW	045-18945	GOLDSBOROUGH PA 422-11	PR	<input checked="" type="checkbox"/>
414975	WELL	PR	12/01/2010	GW	045-18946	GOLDSBOROUGH PA 12-11	PR	<input checked="" type="checkbox"/>
430993	WELL	PR	08/08/2013	OW	045-21817	Goldsborough PA 511-11	PR	<input checked="" type="checkbox"/>
430994	WELL	PR	09/11/2013	OW	045-21818	Goldsborough PA 22-11	PR	<input checked="" type="checkbox"/>
430995	WELL	PR	09/11/2013	OW	045-21819	Goldsborough PA 521-11	PR	<input checked="" type="checkbox"/>
430996	WELL	PR	09/11/2013		045-21820	Goldsborough PA 321-11	PR	<input checked="" type="checkbox"/>
430997	WELL	PR	07/05/2013	OW	045-21821	Goldsborough PA 311-11	PR	<input checked="" type="checkbox"/>

430998	WELL	PR	07/05/2013	OW	045-21822	Goldsborough PA 11-11	PR	X
430999	WELL	PR	07/05/2013	OW	045-21823	Goldsborough PA 312-11	PR	X
431000	WELL	PR	09/11/2013	OW	045-21824	Goldsborough PA 522-11	PR	X
431001	WELL	PR	09/11/2013	OW	045-21825	Goldsborough PA 21-11	PR	X
431002	WELL	PR	09/11/2013		045-21826	Goldsborough PA 322-11	PR	X
431003	WELL	PR	08/08/2013	OW	045-21827	Goldsborough PA 412-11	PR	X
431004	WELL	PR	08/08/2013	OW	045-21828	Goldsborough PA 411-11	PR	X
431005	WELL	PR	08/12/2013	OW	045-21829	Goldsborough PA 512-11	PR	X

Equipment:

Location Inventory

Special Purpose Pits: _____	Drilling Pits: _____	Wells: <u>17</u>	Production Pits: _____
Condensate Tanks: <u>3</u>	Water Tanks: <u>2</u>	Separators: <u>17</u>	Electric Motors: _____
Gas or Diesel Mortors: <u>3</u>	Cavity Pumps: _____	LACT Unit: _____	Pump Jacks: _____
Electric Generators: <u>3</u>	Gas Pipeline: <u>1</u>	Oil Pipeline: _____	Water Pipeline: <u>1</u>
Gas Compressors: _____	VOC Combustor: _____	Oil Tanks: _____	Dehydrator Units: _____
Multi-Well Pits: _____	Pigging Station: _____	Flare: <u>1</u>	Fuel Tanks: <u>1</u>

Location

Lease Road:

Type	Satisfactory/Action Required	comment	Corrective Action	Date
Access	SATISFACTORY			

Signs/Marker:

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

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

Corrective Date: _____

Comment: _____

Corrective Action: _____

Good Housekeeping:

Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
UNUSED EQUIPMENT	ACTION REQUIRED	Unused equipment near separators.	Remove if not needed.	10/02/2014

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
TANK BATTERY	SATISFACTORY	Wire panels		
SEPARATOR	SATISFACTORY	Wire panels		
IGNITOR/COMBUST OR	SATISFACTORY	Wire panels		
WELLHEAD	SATISFACTORY	Panels		

Equipment:					
Type	#	Satisfactory/Action Required	Comment	Corrective Action	CA Date
Gathering Line	1	SATISFACTORY			
Emission Control Device	1	SATISFACTORY	Lit at time of inspection		
Ancillary equipment	4	SATISFACTORY	Chem units w/ containments		
Gas Meter Run	1	SATISFACTORY			
Bird Protectors	11	SATISFACTORY			
Horizontal Heated Separator	17	SATISFACTORY	No containment		
Plunger Lift	17	SATISFACTORY			
Pig Station	1	SATISFACTORY			

Facilities:					
<input type="checkbox"/> New Tank		Tank ID: _____			
Contents	#	Capacity	Type	SE GPS	
PRODUCED WATER	3	300 BBLS	STEEL AST	,	
S/A/V:	SATISFACTORY		Comment:		
Corrective Action:				Corrective Date:	

Paint	
Condition	Adequate
Other (Content)	_____
Other (Capacity)	_____
Other (Type)	_____

Berms					
Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance	
Corrective Action				Corrective Date	
Comment	Same				

Facilities:		<input type="checkbox"/> New Tank	Tank ID: _____	
Contents	#	Capacity	Type	SE GPS
CONDENSATE	3	300 BBLS	STEEL AST	,
S/AV:	SATISFACTORY		Comment:	
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: 414939

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: 414961 Type: WELL API Number: 045-18943 Status: PR Insp. Status: PR

Producing Well

Comment: PR

Facility ID: 414972 Type: WELL API Number: 045-18944 Status: PR Insp. Status: PR

Producing Well

Comment: PR

Facility ID: 414973 Type: WELL API Number: 045-18945 Status: PR Insp. Status: PR

Producing Well

Comment: PR

Facility ID: 414975	Type: WELL	API Number: 045-18946	Status: PR	Insp. Status: PR
Producing Well				
Comment: PR				
Facility ID: 430993	Type: WELL	API Number: 045-21817	Status: PR	Insp. Status: PR
Producing Well				
Comment: PR				
Facility ID: 430994	Type: WELL	API Number: 045-21818	Status: PR	Insp. Status: PR
Producing Well				
Comment: PR				
Facility ID: 430995	Type: WELL	API Number: 045-21819	Status: PR	Insp. Status: PR
Producing Well				
Comment: PR				
Facility ID: 430996	Type: WELL	API Number: 045-21820	Status: PR	Insp. Status: PR
Producing Well				
Comment: PR				
Facility ID: 430997	Type: WELL	API Number: 045-21821	Status: PR	Insp. Status: PR
Producing Well				
Comment: PR				
Facility ID: 430998	Type: WELL	API Number: 045-21822	Status: PR	Insp. Status: PR
Producing Well				
Comment: PR				
Facility ID: 430999	Type: WELL	API Number: 045-21823	Status: PR	Insp. Status: PR
Producing Well				
Comment: PR				
Facility ID: 431000	Type: WELL	API Number: 045-21824	Status: PR	Insp. Status: PR
Producing Well				
Comment: PR				
Facility ID: 431001	Type: WELL	API Number: 045-21825	Status: PR	Insp. Status: PR
Producing Well				
Comment: PR				
Facility ID: 431002	Type: WELL	API Number: 045-21826	Status: PR	Insp. Status: PR
Producing Well				
Comment: PR				
Facility ID: 431003	Type: WELL	API Number: 045-21827	Status: PR	Insp. Status: PR

Producing Well

Comment: PR

Facility ID: 431004 Type: WELL API Number: 045-21828 Status: PR Insp. Status: PR

Producing Well

Comment: PR

Facility ID: 431005 Type: WELL API Number: 045-21829 Status: PR Insp. Status: PR

Producing Well

Comment: PR

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: RANGELAND
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 _____

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: RANGELAND _____

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					
Compaction	Pass	Compaction	Pass	MHSP	Pass	
Drains	Pass	Gravel	Pass			
Gradient Terraces	Pass					

Inspector Name: CONKLIN, CURTIS

Waddles	Pass					
Seeding						
Retention Ponds	Pass					

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

Comment: _____

CA: _____

Pits: NO SURFACE INDICATION OF PIT