

**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:
10/28/2014Document Number:
666800229Overall Inspection:
SATISFACTORY**FIELD INSPECTION FORM**

| | | | | | |
|---------------------|-------------|--------|-----------------|--------------------------|-------------|
| Location Identifier | Facility ID | Loc ID | Inspector Name: | On-Site Inspection | 2A Doc Num: |
| | 419574 | 335037 | Murray, Richard | <input type="checkbox"/> | |

Operator Information:OGCC Operator Number: 96850Name of Operator: WPX ENERGY ROCKY MOUNTAIN LLCAddress: 1001 17TH STREET - SUITE #1200City: 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 |
|------------------|-----------------------------------|-------------------------------|-----------------------|
| Kellerby, Shaun | | shaun.kellerby@state.us.co | |
| Moss, Brad | (970) 285-9377/ (719) 429-3529 | Brad.Moss@WPXEnergy.com | Production foreman |
| Gardner, Michael | | Michael.Gardner@wpxenergy.com | Environmental Manager |

Compliance Summary:QtrQtr: NWSE Sec: 9 Twp: 7S Range: 94W**Inspector Comment:****Related Facilities:**

| Facility ID | Type | Status | Status Date | Well Class | API Num | Facility Name | Insp Status | |
|-------------|------|--------|-------------|------------|-----------|------------------|-------------|-------------------------------------|
| 298254 | WELL | PR | 12/20/2009 | GW | 045-17099 | FEDERAL SR 43-9 | PR | <input checked="" type="checkbox"/> |
| 298255 | WELL | PR | 12/08/2011 | GW | 045-17100 | Federal SR 532-9 | PR | <input checked="" type="checkbox"/> |
| 298256 | WELL | PR | 03/02/2009 | GW | 045-17101 | FEDERAL SR 33-9 | PR | <input checked="" type="checkbox"/> |
| 298257 | WELL | PR | 12/20/2009 | GW | 045-17102 | FEDERAL SR 11-15 | PR | <input checked="" type="checkbox"/> |
| 298258 | WELL | PR | 04/16/2011 | GW | 045-17103 | FEDERAL SR 343-9 | PR | <input checked="" type="checkbox"/> |
| 419569 | WELL | PR | 08/30/2011 | GW | 045-19981 | Federal SR 434-9 | PR | <input checked="" type="checkbox"/> |
| 419572 | WELL | PR | 10/01/2011 | GW | 045-19984 | Federal SR 334-9 | PR | <input checked="" type="checkbox"/> |
| 419574 | WELL | PR | 03/01/2012 | GW | 045-19985 | Federal SR 543-9 | PR | <input checked="" type="checkbox"/> |
| 419576 | WELL | PR | 12/26/2011 | GW | 045-19987 | Federal SR 544-9 | PR | <input checked="" type="checkbox"/> |
| 419580 | WELL | PR | 10/01/2011 | GW | 045-19990 | Federal SR 34-9 | PR | <input checked="" type="checkbox"/> |

Inspector Name: Murray, Richard

| | | | | | | | | |
|--------|------|----|------------|----|-----------|------------------|----|-------------------------------------|
| 419583 | WELL | PR | 03/01/2012 | GW | 045-19993 | Federal SR 443-9 | PR | <input checked="" type="checkbox"/> |
| 419585 | WELL | PR | 12/08/2011 | GW | 045-19994 | Federal SR 44-9 | PR | <input checked="" type="checkbox"/> |
| 419586 | WELL | PR | 03/01/2012 | GW | 045-19995 | Federal SR 344-9 | PR | <input checked="" type="checkbox"/> |
| 419590 | WELL | PR | 03/01/2012 | GW | 045-19998 | Federal SR 444-9 | PR | <input checked="" type="checkbox"/> |
| 419603 | WELL | PR | 03/01/2012 | GW | 045-20000 | Federal SR 333-9 | PR | <input checked="" type="checkbox"/> |
| 419604 | WELL | PR | 12/08/2011 | GW | 045-20001 | Federal SR 433-9 | PR | <input checked="" type="checkbox"/> |
| 419605 | WELL | PR | 10/01/2011 | GW | 045-20002 | Federal SR 534-9 | PR | <input checked="" type="checkbox"/> |
| 423109 | PIT | | 04/05/2011 | | - | FEDERAL SR 33-9 | | <input type="checkbox"/> |

Equipment:Location Inventory

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

Location**Signs/Marker:**

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

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

Corrective Date: _____

Comment: _____

Corrective Action: _____

Spills:

| Type | Area | Volume | Corrective action | CA Date |
|------|------|--------|-------------------|---------|
|------|------|--------|-------------------|---------|

☐ Multiple Spills and Releases?**Fencing/:**

| Type | Satisfactory/Action Required | Comment | Corrective Action | CA Date |
|--------------|------------------------------|------------|-------------------|---------|
| WELLHEAD | SATISFACTORY | Wire panel | | |
| TANK BATTERY | SATISFACTORY | Wire panel | | |
| TANK BATTERY | SATISFACTORY | Wire panel | | |

Inspector Name: Murray, Richard

| Equipment: | | | | | |
|-----------------------------|----|------------------------------|----------------------------|-------------------|---------|
| Type | # | Satisfactory/Action Required | Comment | Corrective Action | CA Date |
| Horizontal Heated Separator | 17 | SATISFACTORY | | | |
| Plunger Lift | 17 | SATISFACTORY | | | |
| Bird Protectors | 9 | SATISFACTORY | | | |
| Ancillary equipment | 4 | SATISFACTORY | Chemical units at wellhead | | |

Facilities: ☐ New Tank Tank ID: _____

| | | | | |
|----------------|---|----------|-----------|--------|
| Contents | # | Capacity | Type | SE GPS |
| PRODUCED WATER | 1 | OTHER | STEEL AST | , |

S/A/V: SATISFACTORY Comment: Centralized battery

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 _____

Facilities: ☐ New Tank Tank ID: _____

| | | | | |
|------------|---|----------|-----------|-----------------------|
| Contents | # | Capacity | Type | SE GPS |
| CONDENSATE | 1 | OTHER | STEEL AST | 39.450540,-107.886980 |

S/A/V: SATISFACTORY Comment: _____

Corrective Action: _____ Corrective Date: _____

Paint

| | |
|-----------|----------|
| Condition | Adequate |
|-----------|----------|

Other (Content) _____

Other (Capacity) 80 bbls

Other (Type) _____

Berms

| | | | | |
|-------|----------|---------------------|---------------------|-------------|
| Type | Capacity | Permeability (Wall) | Permeability (Base) | Maintenance |
| Metal | Adequate | Walls Sufficent | Base Sufficent | Adequate |

Corrective Action _____ Corrective Date _____

Comment _____

Venting:

| | |
|--------|------------------------|
| Yes/No | Comment |
| YES | Bradenhead valves open |

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

Predrill

Location ID: 419574

Site Preparation:

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

S/A/V: _____

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

Form 2A COAs:

| Group | User | Comment | Date |
|-------|-----------|---|------------|
| OGLA | kubeczkod | Reserve pit (or any pit that will hold liquids [if constructed]) must be lined or closed loop system (which has been indicated by Williams on the Form 2A) must be implemented during drilling. | 08/24/2010 |
| OGLA | kubeczkod | No portion of any pit that will be used to hold liquids shall be constructed on fill material, unless the pit and fill slope are designed and certified by a professional engineer, subject to review and approval by the director prior to construction of the pit. The construction and lining of the pit shall be supervised by a professional engineer or their agent. The entire base of the pit must be in cut. | 08/24/2010 |
| OGLA | kubeczkod | The location is in an area of high run off/run-on potential; therefore the pad shall be constructed to prevent any stormwater run-on and/or stormwater runoff. | 08/24/2010 |
| OGLA | kubeczkod | Operator must ensure 110 percent secondary containment for any volume of fluids contained at well site during drilling and completion operations; including, but not limited to, construction of a berm or diversion dike, diversion/collection trenches within and/or outside of berms/dikes, site grading, or other comparable measures sufficiently protective of nearby surface water. If fluids are conveyed via pipeline, operator must implement best management practices to contain any unintentional release of fluids. | 08/24/2010 |
| OGLA | kubeczkod | The moisture content of any drill cuttings in a cuttings pit, trench, or pile shall be as low as practicable to prevent accumulation of liquids greater than de minimis amounts. At the time of closure, the drill cuttings must also meet the applicable standards of table 910-1. | 08/24/2010 |

S/A/V: SATISFACTORY **Comment:** No drilling or completions being performed at time of inspection, No sign of pits or cuttings**CA:** _____ **Date:** _____**Wildlife BMPs:****S/A/V:** _____ **Comment:** _____**CA:** _____ **Date:** _____**Stormwater:****Comment:** _____**Staking:****On Site Inspection (305):**

Surface Owner Contact Information:

Inspector Name: Murray, Richard

| | |
|--|--------------------------------------|
| Name: _____ | Address: _____ |
| Phone Number: _____ | Cell Phone: _____ |
| <u>Operator Rep. Contact Information:</u> | |
| Landman Name: _____ | Phone Number: _____ |
| Date Onsite Request Received: _____ | Date of Rule 306 Consultation: _____ |
| Request LGD Attendance: _____ | |
| <u>LGD Contact Information:</u> | |
| Name: _____ | Phone Number: _____ |
| Agreed to Attend: _____ | |
| <u>Summary of Landowner Issues:</u> | |
| | |
| <u>Summary of Operator Response to Landowner Issues:</u> | |
| | |
| <u>Onsite Inspection Memorandum Summarizing Discussions at Inspection as Attachment:</u> | |
| | |

Facility

| | | | | |
|--|------------|-----------------------|------------|------------------|
| Facility ID: 298254 | Type: WELL | API Number: 045-17099 | Status: PR | Insp. Status: PR |
| Producing Well | | | | |
| Comment: Plunger lift | | | | |
| Facility ID: 298255 | Type: WELL | API Number: 045-17100 | Status: PR | Insp. Status: PR |
| Producing Well | | | | |
| Comment: Plunger lift | | | | |
| Facility ID: 298256 | Type: WELL | API Number: 045-17101 | Status: PR | Insp. Status: PR |
| Producing Well | | | | |
| Comment: Plunger lift | | | | |
| Facility ID: 298257 | Type: WELL | API Number: 045-17102 | Status: PR | Insp. Status: PR |
| Producing Well | | | | |
| Comment: Plunger lift | | | | |
| Facility ID: 298258 | Type: WELL | API Number: 045-17103 | Status: PR | Insp. Status: PR |
| Producing Well | | | | |
| Comment: Plunger lift | | | | |
| Facility ID: 419569 | Type: WELL | API Number: 045-19981 | Status: PR | Insp. Status: PR |
| Producing Well | | | | |
| Comment: Plunger lift | | | | |
| Facility ID: 419572 | Type: WELL | API Number: 045-19984 | Status: PR | Insp. Status: PR |
| Producing Well | | | | |
| Comment: Plunger lift | | | | |
| Facility ID: 419574 | Type: WELL | API Number: 045-19985 | Status: PR | Insp. Status: PR |

Inspector Name: Murray, Richard

Producing Well

Comment: **Plunger lift**

Facility ID: 419576 Type: WELL API Number: 045-19987 Status: PR Insp. Status: PR

Producing Well

Comment: **Plunger lift**

Facility ID: 419580 Type: WELL API Number: 045-19990 Status: PR Insp. Status: PR

Producing Well

Comment: **Plunger lift**

Facility ID: 419583 Type: WELL API Number: 045-19993 Status: PR Insp. Status: PR

Producing Well

Comment: **Plunger lift**

Facility ID: 419585 Type: WELL API Number: 045-19994 Status: PR Insp. Status: PR

Producing Well

Comment: **Plunger lift**

Facility ID: 419586 Type: WELL API Number: 045-19995 Status: PR Insp. Status: PR

Producing Well

Comment: **Plunger lift**

Facility ID: 419590 Type: WELL API Number: 045-19998 Status: PR Insp. Status: PR

Producing Well

Comment: **Plunger lift**

Facility ID: 419603 Type: WELL API Number: 045-20000 Status: PR Insp. Status: PR

Producing Well

Comment: **Plunger lift**

Facility ID: 419604 Type: WELL API Number: 045-20001 Status: PR Insp. Status: PR

Producing Well

Comment: **Plunger lift**

Facility ID: 419605 Type: WELL API Number: 045-20002 Status: PR Insp. Status: PR

Producing Well

Comment: **Plunger lift**

Environmental

Spills/Releases:

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

Comment: _____

Corrective Action: _____ Date: _____

Reportable: _____ GPS: Lat _____ Long _____

Inspector Name: Murray, Richard

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): N _____

Comment: _____

Pilot: _____ Wildlife Protection Devices (fired vessels): YES _____

Reclamation - Storm Water - Pit

Interim Reclamation:

Date Interim Reclamation Started: _____ Date Interim Reclamation Completed: _____

Land Use: OTHER, 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 _____
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: Murray, Richard

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 |
|------------------|-----------------|-------------------------|-----------------------|---------------|--------------------------|---------|
| | | | | | | |

S/A/V: _____

Corrective Date: _____

Comment:

CA:

Pits: ☐ NO SURFACE INDICATION OF PIT

| Permit: | Facility ID | Permit Num | Expiration Date |
|---------|-------------|------------|-----------------|
| | 423109 | 2213211 | |
| | 423109 | 2213211 | |