

**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

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Inspection Date:

11/04/2014

Document Number:

675100605

Overall Inspection:

SATISFACTORY**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	336018	336018	GRANAHAN, KYLE	<input type="checkbox"/>	

Operator Information:OGCC Operator Number: 100264Name of Operator: XTO ENERGY INCAddress: 382 CR 3100City: AZTEC State: NM Zip: 87410

- ☐ 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
Dooling, Jessica		Jessica_Dooling@xtoenergy.com	
Kellerby, Shaun		shaun.kellerby@state.co.us	
Kardos, Kelly		kelly_kardos@xtoenergy.com	
Reid, Van		van_reid@xtoenergy.com	

Compliance Summary:QtrQtr: SWSE Sec: 33 Twp: 1S Range: 97W**Inspector Comment:****Related Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status	
293172	WELL	SI	04/10/2013	GW	103-11097	FREEDOM UNIT 197-33A3	PR	<input checked="" type="checkbox"/>
293173	WELL	PR	08/18/2010	GW	103-11101	FREEDOM UNIT 197-33A5	PR	<input checked="" type="checkbox"/>
293174	WELL	SI	04/10/2013	GW	103-11100	FREEDOM UNIT 197-33A4	PR	<input checked="" type="checkbox"/>
293176	WELL	SI	04/10/2013	GW	103-11099	FREEDOM UNIT 197-33A1	PR	<input checked="" type="checkbox"/>
293178	WELL	PR		GW	103-11098	FREEDOM UNIT 197-33A2	PR	<input checked="" type="checkbox"/>
293829	PIT	AC	12/03/2007		-	FU 197-33 A!	AC	<input type="checkbox"/>
299330	WELL	SI	04/10/2013	GW	103-11399	FREEDOM UNIT 197-33A7	PR	<input checked="" type="checkbox"/>
299331	WELL	PR	05/18/2012	GW	103-11400	FREEDOM UNIT 197-33A9	PR	<input checked="" type="checkbox"/>
299332	WELL	SI	04/10/2013	GW	103-11401	FREEDOM UNIT 197-33A8	PR	<input checked="" type="checkbox"/>
412690	WELL	PR	09/01/2005	GW	103-11535	FREEDOM UNIT 197-33A6	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 Motors: _____	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: _____

LocationSigns/Marker:

Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
BATTERY	SATISFACTORY	At entrance of location		
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
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☐ Multiple Spills and Releases?Equipment:

Type	#	Satisfactory/Action Required	Comment	Corrective Action	CA Date
Horizontal Separator	1	SATISFACTORY			
Deadman # & Marked	10	SATISFACTORY			
Gas Meter Run	1	SATISFACTORY			

Facilities:☐ New Tank

Tank ID: _____

Contents	#	Capacity	Type	SE GPS
PRODUCED WATER	1	OTHER	STEEL AST	39.915230,-108.285260

S/A/V: SATISFACTORY

Comment: _____

Corrective Action: _____

Corrective Date: _____

Paint

Condition	Adequate
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Other (Content) _____

Other (Capacity) 750bbls

Other (Type) _____

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Metal	Adequate	Walls Sufficient	Base Sufficient	Adequate

Inspector Name: GRANAHAN, KYLE

Corrective Action		Corrective Date	
Comment			

Venting:	
Yes/No	Comment
NO	

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

Predrill

Location ID: 336018

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:

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Summary of Operator Response to Landowner Issues:

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Onsite Inspection Memorandum Summarizing Discussions at Inspection as Attachment:

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Facility

Facility ID: 293172 Type: WELL API Number: 103-11097 Status: SI Insp. Status: PR

Producing WellComment: **Pr**Facility ID: 293173 Type: WELL API Number: 103-11101 Status: PR Insp. Status: PR**Producing Well**Comment: **Pr**Facility ID: 293174 Type: WELL API Number: 103-11100 Status: SI Insp. Status: PR**Producing Well**Comment: **Pr**Facility ID: 293176 Type: WELL API Number: 103-11099 Status: SI Insp. Status: PR**Producing Well**Comment: **Pr**Facility ID: 293178 Type: WELL API Number: 103-11098 Status: PR Insp. Status: PR**Producing Well**Comment: **Pr**Facility ID: 299330 Type: WELL API Number: 103-11399 Status: SI Insp. Status: PR**Producing Well**Comment: **Pr**Facility ID: 299331 Type: WELL API Number: 103-11400 Status: PR Insp. Status: PR**Producing Well**Comment: **Pr**Facility ID: 299332 Type: WELL API Number: 103-11401 Status: SI Insp. Status: PR**Producing Well**Comment: **Pr**Facility ID: 412690 Type: WELL API Number: 103-11535 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: _____

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? _____

Comment: _____

Overall Interim Reclamation _____

Final Reclamation/ Abandoned Location:

Inspector Name: GRANAHAH, KYLE

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 _____

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	Ditches	Pass			
Berms	Fail	Compaction	Pass	MHSP	Pass	

S/A/V: **ACTION REQUIRED** Corrective Date: **12/11/2014**

Comment: **Maintain location berms, weeds growing on them.**

CA: **Comply with COGCC rules**

Pits: ☒ NO SURFACE INDICATION OF PIT

Permit:	Facility ID	Permit Num	Expiration Date
	293829	1433759	
	293829	1433759	