

**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:
12/01/2014Document Number:
666800347Overall Inspection:
SATISFACTORY**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	290114	335688	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	
Gardner, Michael		Michael.Gardner@wpxenergy.com	Environmental Manager
Moss, Brad		Brad.Moss@wpxenergy.com	Production Foreman

Compliance Summary:QtrQtr: SENE Sec: 14 Twp: 6S Range: 94W

Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Action Required	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
05/18/2011	200311518	PR	PR	SATISFACTORY			No
01/20/2010	200234790	PR	PR	SATISFACTORY			No

Inspector Comment:**Related Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status	
111305	PIT	CL	09/23/1999		-	GOLDING 4	CL	<input type="checkbox"/>
210453	WELL	PR	12/01/2010	GW	045-06209	GOLDING 4	PR	<input checked="" type="checkbox"/>
290105	WELL	PR	10/31/2008	GW	045-14016	CLOUGH RWF 32-14	PR	<input checked="" type="checkbox"/>
290106	WELL	PR	04/12/2007	GW	045-14015	CLOUGH RWF 31-14	PR	<input checked="" type="checkbox"/>
290107	WELL	PR	01/23/2008	GW	045-14014	CLOUGH RWF 542-14	PR	<input checked="" type="checkbox"/>
290108	WELL	PR	01/23/2008	GW	045-14013	CLOUGH RWF 331-14	PR	<input checked="" type="checkbox"/>
290109	WELL	PR	11/30/2008	GW	045-14012	CLOUGH RWF 442-14	PR	<input checked="" type="checkbox"/>
290110	WELL	PR	11/30/2008	GW	045-14011	CLOUGH RWF 342-14	PR	<input checked="" type="checkbox"/>

Inspector Name: Murray, Richard

290111	WELL	PR	01/23/2008	GW	045-14010	CLOUGH RWF 532-14	PR	<input checked="" type="checkbox"/>
290112	WELL	PR	01/23/2008	GW	045-14009	CLOUGH RWF 431-14	PR	<input checked="" type="checkbox"/>
290113	WELL	PR	04/12/2007	GW	045-14008	CLOUGH RWF 531-14	PR	<input checked="" type="checkbox"/>
290114	WELL	PR	04/12/2007	GW	045-14007	CLOUGH RWF 41-14	PR	<input checked="" type="checkbox"/>
290115	WELL	PR	07/31/2008	GW	045-14006	CLOUGH RWF 341-14	PR	<input checked="" type="checkbox"/>
290116	WELL	PR	01/23/2008	GW	045-14005	CLOUGH RWF 441-14	PR	<input checked="" type="checkbox"/>
290117	WELL	PR	04/12/2007	GW	045-14004	CLOUGH RWF 541-14	PR	<input checked="" type="checkbox"/>
290118	WELL	PR	11/30/2008	GW	045-14003	CLOUGH RWF 312-13	PR	<input checked="" type="checkbox"/>
290119	WELL	PR	11/30/2008	GW	045-14002	CLOUGH RWF 12-13	PR	<input checked="" type="checkbox"/>
290120	WELL	PR	11/30/2008	GW	045-14001	CLOUGH RWF 412-13	PR	<input checked="" type="checkbox"/>
290121	WELL	PR	10/31/2008	GW	045-14000	CLOUGH RWF 512-13	PR	<input checked="" type="checkbox"/>
290122	WELL	PR	11/30/2008	GW	045-13999	CLOUGH RWF 332-14	PR	<input checked="" type="checkbox"/>
290123	WELL	PR	12/01/2009	GW	045-13998	CLOUGH RWF 432-14	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 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			
CONTAINERS	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?

Fencing/:

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

Equipment:

Type	#	Satisfactory/Action Required	Comment	Corrective Action	CA Date
Bird Protectors	11	SATISFACTORY			
Plunger Lift	20	SATISFACTORY			
Compressor	2	SATISFACTORY			
Ancillary equipment	5	SATISFACTORY	Chemical units at wellhead		
Emission Control Device	1	SATISFACTORY			

Facilities:☐ New Tank

Tank ID: _____

Contents	#	Capacity	Type	SE GPS
PRODUCED WATER	3	300 BBLS	STEEL AST	,
S/A/V:	SATISFACTORY		Comment:	Centralized battery
Corrective Action:				Corrective Date:

Paint

Condition	Adequate
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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	3	300 BBLS	STEEL AST	39.526790,-107.848110
S/A/V:	SATISFACTORY		Comment:	
Corrective Action:				Corrective Date:

Paint

Condition	Adequate
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Other (Content) _____

Other (Capacity) _____

Other (Type) _____

Berms

Inspector Name: Murray, Richard

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance	
Metal	Adequate	Walls Sufficient	Base Sufficient	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: 290114

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:	210453	Type:	WELL	API Number:	045-06209	Status:	PR	Insp. Status:	PR
Producing Well									
Comment:	Plunger lift								
Facility ID:	290105	Type:	WELL	API Number:	045-14016	Status:	PR	Insp. Status:	PR
Producing Well									
Comment:	Plunger lift								
Facility ID:	290106	Type:	WELL	API Number:	045-14015	Status:	PR	Insp. Status:	PR
Producing Well									
Comment:	Plunger lift								
Facility ID:	290107	Type:	WELL	API Number:	045-14014	Status:	PR	Insp. Status:	PR
Producing Well									
Comment:	Plunger lift								
Facility ID:	290108	Type:	WELL	API Number:	045-14013	Status:	PR	Insp. Status:	PR
Producing Well									
Comment:	Plunger lift								
Facility ID:	290109	Type:	WELL	API Number:	045-14012	Status:	PR	Insp. Status:	PR
Producing Well									
Comment:	Plunger lift								
Facility ID:	290110	Type:	WELL	API Number:	045-14011	Status:	PR	Insp. Status:	PR
Producing Well									
Comment:	Plunger lift								
Facility ID:	290111	Type:	WELL	API Number:	045-14010	Status:	PR	Insp. Status:	PR
Producing Well									
Comment:	Plunger lift								
Facility ID:	290112	Type:	WELL	API Number:	045-14009	Status:	PR	Insp. Status:	PR
Producing Well									
Comment:	Plunger lift								
Facility ID:	290113	Type:	WELL	API Number:	045-14008	Status:	PR	Insp. Status:	PR
Producing Well									
Comment:	Plunger lift								
Facility ID:	290114	Type:	WELL	API Number:	045-14007	Status:	PR	Insp. Status:	PR
Producing Well									
Comment:	Plunger lift								
Facility ID:	290115	Type:	WELL	API Number:	045-14006	Status:	PR	Insp. Status:	PR

Producing WellComment: **Plunger lift**Facility ID: 290116 Type: WELL API Number: 045-14005 Status: PR Insp. Status: PR**Producing Well**Comment: **Plunger lift**Facility ID: 290117 Type: WELL API Number: 045-14004 Status: PR Insp. Status: PR**Producing Well**Comment: **Plunger lift**Facility ID: 290118 Type: WELL API Number: 045-14003 Status: PR Insp. Status: PR**Producing Well**Comment: **Plunger lift**Facility ID: 290119 Type: WELL API Number: 045-14002 Status: PR Insp. Status: PR**Producing Well**Comment: **Plunger lift**Facility ID: 290120 Type: WELL API Number: 045-14001 Status: PR Insp. Status: PR**Producing Well**Comment: **Plunger lift**Facility ID: 290121 Type: WELL API Number: 045-14000 Status: PR Insp. Status: PR**Producing Well**Comment: **Plunger lift**Facility ID: 290122 Type: WELL API Number: 045-13999 Status: PR Insp. Status: PR**Producing Well**Comment: **Plunger lift**Facility ID: 290123 Type: WELL API Number: 045-13998 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 _____

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): Y _____

Comment: _____

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

Reclamation - Storm Water - Pit**Interim Reclamation:**

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

Land Use: _____

Comment: Interim in progress

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? Pass Production areas stabilized ? _____

1003c. Compacted areas have been cross ripped? Pass

1003d. Drilling pit closed? Pass 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? Pass

Production areas have been stabilized? Pass Segregated soils have been replaced? Pass

RESTORATION AND REVEGETATIONCropland

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: Murray, Richard

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
Seeding	Pass					
Seeding	Pass					
Ditches	Pass					

S/A/V: SATISFACTOR
Y _____

Corrective Date: _____

Comment: _____

CA: _____

Pits: ☒ NO SURFACE INDICATION OF PIT