

Inspector Name: Hughes, Jim

**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:
12/19/2014Document Number:
674900227Overall Inspection:
SATISFACTORY**FIELD INSPECTION FORM**

| | | | | | |
|---------------------|-------------|--------|-----------------|--------------------------|-------------|
| Location Identifier | Facility ID | Loc ID | Inspector Name: | On-Site Inspection | 2A Doc Num: |
| | 257076 | 326556 | Hughes, Jim | <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 |
|------------------|--------------|-------------------------------|--------------------|
| Labowskie, Steve | | steve.labowskie@state.co.us | |
| Harrison, Lyndon | | lyndon_harrison@xtoenergy.com | Durango, Raton |
| Hixon, Logan | 505-386-8018 | logan_hixon@xtoenergy.com | EH&S Technician |
| Percell, Bob | 970-759-2277 | bob_percell@xtoenergy.com | Production Foreman |
| Fischer, Alex | | alex.fischer@state.co.us | |

Compliance Summary:QtrQtr: NENE Sec: 24 Twp: 35N Range: 8W

| Insp. Date | Doc Num | Insp. Type | Insp Status | Satisfactory /Action Required | PA P/F/I | Pas/Fail (P/F) | Violation (Y/N) |
|------------|-----------|------------|-------------|-------------------------------|----------|----------------|-----------------|
| 08/13/2014 | 674600780 | PR | PR | SATISFACTORY | P | | No |
| 10/17/2012 | 669400183 | PR | PR | SATISFACTORY | I | | No |
| 08/19/2011 | 200321735 | PR | PR | SATISFACTORY | | | No |
| 03/16/2009 | 200208713 | PR | PR | SATISFACTORY | | | No |
| 09/08/2006 | 200101832 | PR | PR | SATISFACTORY | | Pass | No |
| 01/06/2005 | 200066767 | PR | PR | SATISFACTORY | | Pass | No |
| 06/03/2004 | 200057559 | CO | PR | SATISFACTORY | | Pass | No |
| 10/28/2003 | 200047863 | PR | PR | SATISFACTORY | | Pass | No |

Inspector Comment:

On December 19, 2014 COGCC SW EPS Jim Hughes conducted an environmental field inspection of the XTO Huber #3-24. For the most recent field inspection report of this facility, please refer to document #674600780.

Related Facilities:

| Facility ID | Type | Status | Status Date | Well Class | API Num | Facility Name | Insp Status | |
|-------------|------|--------|-------------|------------|-----------|---------------|-------------|-------------------------------------|
| 257076 | WELL | PR | 07/01/2013 | GW | 067-08295 | HUBER 3-24 | EI | <input checked="" type="checkbox"/> |

Equipment:Location Inventory

Inspector Name: Hughes, Jim

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

Lease Road:

| Type | Satisfactory/Action Required | comment | Corrective Action | Date |
|--------|------------------------------|---------|-------------------|------|
| Access | SATISFACTORY | | | |

Signs/Marker:

| Type | Satisfactory/Action Required | Comment | Corrective Action | CA Date |
|----------|------------------------------|---|-------------------|---------|
| WELLHEAD | SATISFACTORY | Free standing sign near entrance to location. | | |

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 |
|-----------|------------------------------|--|-------------------|---------|
| PUMP JACK | SATISFACTORY | Combination of sound walls and chain link. | | |

Equipment:

| Type | # | Satisfactory/Action Required | Comment | Corrective Action | CA Date |
|---------------------------|---|------------------------------|--|-------------------|---------|
| Bird Protectors | 1 | SATISFACTORY | | | |
| Vertical Heated Separator | 1 | SATISFACTORY | | | |
| Pump Jack | 1 | SATISFACTORY | | | |
| Deadman # & Marked | 4 | SATISFACTORY | | | |
| Ancillary equipment | 1 | SATISFACTORY | Electrical supply | | |
| Gas Meter Run | 1 | SATISFACTORY | Combined with separator and telemetry equipment. | | |

Venting:

| Yes/No | Comment |
|--------|---------|
| | |

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

Predrill

Location ID: 257076

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: 257076 Type: WELL API Number: 067-08295 Status: PR Insp. Status: EI

Environmental

Spills/Releases:

Type of Spill: Description: Estimated Spill Volume:

Comment:

Corrective Action: Date:

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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 _____

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1003 f. Weeds Noxious weeds? _____

Comment: _____

Overall Interim Reclamation _____

Final Reclamation/ Abandoned Location:

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 |
|------------------|-----------------|-------------------------|-----------------------|---------------|--------------------------|---------|
| Compaction | Pass | Culverts | Pass | | | |

S/A/V: SATISFACTOR

Corrective Date: _____

Y

Comment: _____

CA: _____

Pits: ☒ NO SURFACE INDICATION OF PIT