

**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:  
01/20/2015Document Number:  
674700872Overall Inspection:  
SATISFACTORY**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	335848	335848	LONGWORTH, MIKE	<input type="checkbox"/>	

**Operator Information:**OGCC Operator Number: 100185Name of Operator: ENCANA OIL & GAS (USA) INCAddress: 370 17TH ST STE 1700City: 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
Inspections, General	970-285-2665	cogcc.inspections@encana.com	

**Compliance Summary:**QtrQtr: NENE Sec: 36 Twp: 5S Range: 96W

Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Action Required	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
01/02/2014	663902588			SATISFACTORY			No

**Inspector Comment:****Related Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status	
283784	WELL	PR	05/03/2007	GW	045-12002	N. PARACHUTE WF06B A36 596	PR	<input checked="" type="checkbox"/>
283786	WELL	DA	03/16/2007	LO	045-12003	N. PARACHUTE WF02D A36 596	DA	<input type="checkbox"/>
283788	WELL	PR	01/14/2007	GW	045-12004	N. PARACHUTE WF07B A36 596	PR	<input checked="" type="checkbox"/>
283789	WELL	PR	03/15/2006	GW	045-12005	N. PARACHUTE WF06D A36 596	PR	<input checked="" type="checkbox"/>
283791	WELL	PR	02/01/2011	GW	045-12006	N. PARACHUTE WF07D A36 596	PR	<input checked="" type="checkbox"/>
283796	WELL	PR	03/12/2007	GW	045-11997	N. PARACHUTE WF03D A36 596	PR	<input checked="" type="checkbox"/>
283798	WELL	PR	03/12/2007	GW	045-11996	N. PARACHUTE WF04D A36 596	PR	<input checked="" type="checkbox"/>
283800	WELL	PR	02/01/2014	GW	045-11995	N. PARACHUTE WF02B A36 596	PR	<input checked="" type="checkbox"/>
287277	PIT	AC	10/04/2006		-	A36 596	AC	<input type="checkbox"/>
289595	WELL	PR	03/06/2007	GW	045-13804	N. PARACHUTE WF02D-DX A36 59	PR	<input checked="" type="checkbox"/>

Inspector Name: LONGWORTH, MIKE

294899	WELL	PR	03/10/2008	GW	045-15628	N. PARACHUTE WF15C-25 A36 59	PR	<input checked="" type="checkbox"/>
294900	WELL	PR	11/02/2008	GW	045-15629	N. PARACHUTE WF15A-25 A36 59	PR	<input checked="" type="checkbox"/>
294901	WELL	PR	10/13/2008	GW	045-15630	N. PARACHUTE WF07C-36 A36 59	PR	<input checked="" type="checkbox"/>
294902	WELL	PR	10/26/2008	GW	045-15631	N. PARACHUTE WF07A-36 A36 59	PR	<input checked="" type="checkbox"/>
294903	WELL	PR	10/13/2008	GW	045-15632	N. PARACHUTE WF06A-36 A36 59	PR	<input checked="" type="checkbox"/>
294909	WELL	PR	10/25/2008	GW	045-15633	N. PARACHUTE WF03C-36 A36 59	PR	<input checked="" type="checkbox"/>
294910	WELL	PR	10/25/2008	GW	045-15634	N. PARACHUTE WF02A-36 A36 59	PR	<input checked="" type="checkbox"/>
294912	WELL	PR	10/13/2008	GW	045-15636	N. PARACHUTE WF06C-36 A36 59	PR	<input checked="" type="checkbox"/>
294913	WELL	PR	10/23/2008	GW	045-15635	N. PARACHUTE WF02C-36 A36 69	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: _____

**Location****Signs/Marker:**

Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
WELLHEAD	SATISFACTORY			
CONTAINERS	SATISFACTORY			
TANK LABELS/PLACARDS	SATISFACTORY			
BATTERY	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?**Equipment:**

Type	#	Satisfactory/Action Required	Comment	Corrective Action	CA Date
Gas Meter Run	17	SATISFACTORY			
Ancillary equipment	3	SATISFACTORY			

Inspector Name: LONGWORTH, MIKE

Plunger Lift	17	SATISFACTORY			
Other	17	SATISFACTORY			

**Facilities:** ☐ New Tank Tank ID: \_\_\_\_\_

Contents	#	Capacity	Type	SE GPS
PRODUCED WATER	1	<100 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
Metal	Adequate	Walls Sufficient	Base Sufficient	Adequate

Corrective Action		Corrective Date	
-------------------	--	-----------------	--

Comment	
---------	--

**Venting:**

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

--	--

**Flaring:**

Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
------	------------------------------	---------	-------------------	---------

--	--	--	--	--

**Predrill**

Location ID: 335848

**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: 283784 Type: WELL API Number: 045-12002 Status: PR Insp. Status: PR

**Producing Well**

Comment: Producing well

Facility ID: 283788 Type: WELL API Number: 045-12004 Status: PR Insp. Status: PR

**Producing Well**

Comment: Producing well

Facility ID: 283789 Type: WELL API Number: 045-12005 Status: PR Insp. Status: PR

**Producing Well**

Comment: Producing well

Facility ID:	283791	Type:	WELL	API Number:	045-12006	Status:	PR	Insp. Status:	PR
Producing Well									
Comment:	Producing well								
Facility ID:	283796	Type:	WELL	API Number:	045-11997	Status:	PR	Insp. Status:	PR
Producing Well									
Comment:	Producing well								
Facility ID:	283798	Type:	WELL	API Number:	045-11996	Status:	PR	Insp. Status:	PR
Producing Well									
Comment:	Producing well								
Facility ID:	283800	Type:	WELL	API Number:	045-11995	Status:	PR	Insp. Status:	PR
Producing Well									
Comment:	Producing well								
Facility ID:	289595	Type:	WELL	API Number:	045-13804	Status:	PR	Insp. Status:	PR
Producing Well									
Comment:	Producing well								
Facility ID:	294899	Type:	WELL	API Number:	045-15628	Status:	PR	Insp. Status:	PR
Producing Well									
Comment:	Producing well								
Facility ID:	294900	Type:	WELL	API Number:	045-15629	Status:	PR	Insp. Status:	PR
Producing Well									
Comment:	Producing well								
Facility ID:	294901	Type:	WELL	API Number:	045-15630	Status:	PR	Insp. Status:	PR
Producing Well									
Comment:	Producing well								
Facility ID:	294902	Type:	WELL	API Number:	045-15631	Status:	PR	Insp. Status:	PR
Producing Well									
Comment:	Producing well								
Facility ID:	294903	Type:	WELL	API Number:	045-15632	Status:	PR	Insp. Status:	PR
Producing Well									
Comment:	Producing well								
Facility ID:	294909	Type:	WELL	API Number:	045-15633	Status:	PR	Insp. Status:	PR
Producing Well									
Comment:	Producing well								
Facility ID:	294910	Type:	WELL	API Number:	045-15634	Status:	PR	Insp. Status:	PR

**Producing Well**Comment: **Producing well**

Facility ID: 294912 Type: WELL API Number: 045-15636 Status: PR Insp. Status: PR

**Producing Well**Comment: **Producing well**

Facility ID: 294913 Type: WELL API Number: 045-15635 Status: PR Insp. Status: PR

**Producing Well**Comment: **Producing well****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:**

Lat Long

DWR Receipt Num: Owner Name: GPS :

**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? 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? CM

CA \_\_\_\_\_ CA Date \_\_\_\_\_

Guy line anchors marked? \_\_\_\_\_ CM \_\_\_\_\_

CA \_\_\_\_\_ CA Date \_\_\_\_\_

1003b. Area no longer in use? In Production areas stabilized ? Pass

1003c. Compacted areas have been cross ripped? \_\_\_\_\_

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? \_\_\_\_\_

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: \_\_\_\_\_

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					
Gravel	Pass					
		Compaction	Pass			
Berms	Pass					

Inspector Name: LONGWORTH, MIKE

		Ditches	Pass			
				MHSP	Pass	
Ditches	Pass					
		Culverts	Pass			
Seeding	Pass					
		Gravel	Pass			

S/A/V: SATISFACTOR  
Y

Corrective Date: \_\_\_\_\_

Comment: \_\_\_\_\_

CA: \_\_\_\_\_

**Pits:** ☒ NO SURFACE INDICATION OF PIT

Permit:	Facility ID	Permit Num	Expiration Date
	287277	1433524	