

**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:  
01/29/2015Document Number:  
675201129Overall Inspection:  
SATISFACTORY**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	334626	334626	CONKLIN, CURTIS	<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
WPX, Energy		COGCCInspectionReports@wpxenergy.com	All Inspections

**Compliance Summary:**QtrQtr: NENE Sec: 5 Twp: 7S Range: 95W**Inspector Comment:****Related Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status	
258716	WELL	PR	12/12/2000	GW	045-07650	KNIGHT PA 41-5	PR	<input checked="" type="checkbox"/>
280663	WELL	PR	10/17/2005	GW	045-11315	KNIGHT PA 512-4	PR	<input checked="" type="checkbox"/>
280716	WELL	PR	07/20/2006	GW	045-11325	KNIGHT PA 441-5	PR	<input checked="" type="checkbox"/>
280717	WELL	PR	10/18/2005	GW	045-11326	KNIGHT PA 641-5	PR	<input checked="" type="checkbox"/>
280719	WELL	PR	07/20/2006	GW	045-11327	KNIGHT PA 511-4	PR	<input checked="" type="checkbox"/>
280720	WELL	PR	07/20/2006	GW	045-11328	KNIGHT PA 12-4	PR	<input checked="" type="checkbox"/>
280721	WELL	PR	03/08/2007	GW	045-11329	KNIGHT PA 312-4	PR	<input checked="" type="checkbox"/>
280722	WELL	PR	07/20/2006	GW	045-11330	KNIGHT PA 341-5	PR	<input checked="" type="checkbox"/>
280723	WELL	PR	07/20/2006	GW	045-11331	KNIGHT PA 411-4	PR	<input checked="" type="checkbox"/>
280724	WELL	PR	07/20/2006	GW	045-11332	KNIGHT PA 412-4	PR	<input checked="" type="checkbox"/>
280725	WELL	PR	10/18/2005	GW	045-11333	KNIGHT PA 541-5	PR	<input checked="" type="checkbox"/>
438121	SPILL OR RELEASE	CL	07/12/2014		-	SPILL/RELEASE POINT	CL	<input 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
CONTAINERS	SATISFACTORY			
TANK LABELS/PLACARDS	SATISFACTORY			
WELLHEAD	SATISFACTORY			

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

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

Comment: 970-285-9377

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
SEPARATOR	SATISFACTORY	Wire Panels		
WELLHEAD	SATISFACTORY	Wire Panels		
TANK BATTERY	SATISFACTORY	Wire Panels		

**Equipment:**

Type	#	Satisfactory/Action Required	Comment	Corrective Action	CA Date
Bird Protectors	6	SATISFACTORY			
Plunger Lift	11	SATISFACTORY			
Deadman # & Marked	5	SATISFACTORY			
Horizontal Heated Separator	10	SATISFACTORY			
Ancillary equipment	2	SATISFACTORY	Chem units w/ containments		

**Facilities:**☐ New Tank

Tank ID: \_\_\_\_\_

Contents	#	Capacity	Type	SE GPS
CONDENSATE	2	300 BBLs	STEEL AST	,

S/A/V: SATISFACTORY

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

Corrective Action: \_\_\_\_\_

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

Inspector Name: CONKLIN, CURTIS

Paint Condition	Adequate				
Other (Content)					
Other (Capacity)					
Other (Type)					
<b>Berms</b>					
Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance	
Metal	Adequate	Walls Sufficient	Base Sufficient	Adequate	
Corrective Action				Corrective Date	
Comment					
<b>Venting:</b>					
Yes/No	Comment				
<b>Flaring:</b>					
Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date	

**Predrill**

Location ID: 334626

**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: 258716 Type: WELL API Number: 045-07650 Status: PR Insp. Status: PR

**Producing Well**

Comment: PR w/ plunger. Facitlites on PA 311-4 pad

Facility ID: 280663 Type: WELL API Number: 045-11315 Status: PR Insp. Status: PR

**Producing Well**

Comment: PR w/ plunger

Facility ID: 280716 Type: WELL API Number: 045-11325 Status: PR Insp. Status: PR

**Producing Well**

Comment: PR w/ plunger

Facility ID:	280717	Type:	WELL	API Number:	045-11326	Status:	PR	Insp. Status:	PR
<b>Producing Well</b>									
Comment:	PR w/ plunger								
Facility ID:	280719	Type:	WELL	API Number:	045-11327	Status:	PR	Insp. Status:	PR
<b>Producing Well</b>									
Comment:	PR w/ plunger								
Facility ID:	280720	Type:	WELL	API Number:	045-11328	Status:	PR	Insp. Status:	PR
<b>Producing Well</b>									
Comment:	PR w/ plunger								
Facility ID:	280721	Type:	WELL	API Number:	045-11329	Status:	PR	Insp. Status:	PR
<b>Producing Well</b>									
Comment:	PR w/ plunger								
Facility ID:	280722	Type:	WELL	API Number:	045-11330	Status:	PR	Insp. Status:	PR
<b>Producing Well</b>									
Comment:	PR w/ plunger								
Facility ID:	280723	Type:	WELL	API Number:	045-11331	Status:	PR	Insp. Status:	PR
<b>Producing Well</b>									
Comment:	PR w/ plunger								
Facility ID:	280724	Type:	WELL	API Number:	045-11332	Status:	PR	Insp. Status:	PR
<b>Producing Well</b>									
Comment:	PR w/ plunger								
Facility ID:	280725	Type:	WELL	API Number:	045-11333	Status:	PR	Insp. Status:	PR
<b>Producing Well</b>									
Comment:	PR w/ plunger								

**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
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**Field Parameters:**

Inspector Name: CONKLIN, CURTIS

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:**

Date Final Reclamation Started: \_\_\_\_\_ Date Final Reclamation Completed: \_\_\_\_\_

Final Land Use: \_\_\_\_\_

Inspector Name: CONKLIN, CURTIS

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
Berms	Pass					
Gravel	Pass					
Compaction	Pass	Compaction				

S/A/V: \_\_\_\_\_ Corrective Date: \_\_\_\_\_

Comment:

CA:

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