

**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:

01/30/2015

Document Number:

674700933

Overall Inspection:

ACTION REQUIRED**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	334596	334596	LONGWORTH, MIKE	<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
Ahlstrand, Dennis		dennis.ahlstrand@state.co.us	
Inspection, WPX	970-263-2716	COGCCInspectionReports@wpxenergy.com	WPX Inspection Mail Box

Compliance Summary:QtrQtr: NENE Sec: 3 Twp: 7S Range: 96W

Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Action Required	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
02/06/2014	663902766			SATISFACTORY	I		No
07/16/2013	663801275			ACTION REQUIRED	I		No

Inspector Comment:

Added location id # 311637 to this location (334596).

Related Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status	
259464	WELL	PR	03/06/2001	GW	045-07732	AMERICAN SODA GM 266-3	PR	<input checked="" type="checkbox"/>
282174	WELL	PR		GW	045-11696	SOLVAY CHEMICALS GM 541-3	PR	<input checked="" type="checkbox"/>
282176	WELL	PR	03/18/2006	GW	045-11695	SOLVAY CHEMICALS GM 441-3	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

Lease Road:				
Type	Satisfactory/Action Required	comment	Corrective Action	Date
Access	SATISFACTORY	Several muddy holes and ruts.	Maintain road	

Signs/Marker:				
Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
WELLHEAD	SATISFACTORY			
BATTERY	SATISFACTORY			
TANK LABELS/PLACARDS	ACTION REQUIRED	1000 gallon metal tank no label.	Install sign to comply with rule 210.	02/13/2015

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

Corrective Date: _____

Comment: _____

Corrective Action: _____

Spills:				
Type	Area	Volume	Corrective action	CA Date
	WELLHEAD	<= 5 bbls	Clean oil stain from around well GM 541-3. Stain was also on 02/06/2014 inspection doc # 663902766	02/13/2015

☐ Multiple Spills and Releases?

Fencing/:				
Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
WELLHEAD	SATISFACTORY			
TANK BATTERY	SATISFACTORY			
SEPARATOR	SATISFACTORY			

<u>Equipment:</u>					
Type	#	Satisfactory/Action Required	Comment	Corrective Action	CA Date
Bird Protectors	3	SATISFACTORY			
Horizontal Heated Separator	3	SATISFACTORY			
Plunger Lift	3	SATISFACTORY			

Facilities: <input type="checkbox"/> New Tank Tank ID: _____				
Contents	#	Capacity	Type	SE GPS
	1	<50 BBLS	STEEL AST	,
S/A/V:	SATISFACTORY	Comment:		
Corrective Action:				Corrective Date:

Paint

Condition	Adequate
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Other (Content) Not labeled see sign section

Other (Capacity) Not labeled see sign section

Other (Type) _____

Berms

Inspector Name: LONGWORTH, MIKE

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance											
Metal	Adequate	Walls Sufficient	Base Sufficient	Adequate											
Corrective Action					Corrective Date										
Comment	Livestock tank														
Facilities: <input type="checkbox"/> New Tank Tank ID: _____															
Contents	#	Capacity	Type	SE GPS											
CONDENSATE	1	200 BBLS	STEEL AST	,											
S/A/V:	SATISFACTORY		Comment:												
Corrective Action:					Corrective Date:										
<u>Paint</u> Condition Adequate Other (Content) _____ Other (Capacity) _____ Other (Type) _____															
<u>Berms</u> <table border="1"> <tr> <td>Type</td><td>Capacity</td><td>Permeability (Wall)</td><td>Permeability (Base)</td><td>Maintenance</td></tr> <tr> <td>Metal</td><td>Adequate</td><td>Walls Sufficient</td><td>Base Sufficient</td><td>Adequate</td></tr> </table>						Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance	Metal	Adequate	Walls Sufficient	Base Sufficient	Adequate
Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance											
Metal	Adequate	Walls Sufficient	Base Sufficient	Adequate											
Corrective Action					Corrective Date										
Comment															
Facilities: <input type="checkbox"/> New Tank Tank ID: _____															
Contents	#	Capacity	Type	SE GPS											
PRODUCED WATER	2	<100 BBLS	STEEL AST	,											
S/A/V:	SATISFACTORY		Comment:												
Corrective Action:					Corrective Date:										
<u>Paint</u> Condition Adequate Other (Content) _____ Other (Capacity) 80 bbl Other (Type) _____															
<u>Berms</u> <table border="1"> <tr> <td>Type</td><td>Capacity</td><td>Permeability (Wall)</td><td>Permeability (Base)</td><td>Maintenance</td></tr> <tr> <td></td><td></td><td></td><td></td><td></td></tr> </table>						Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance					
Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance											
Corrective Action					Corrective Date										
Comment															
Venting:															
Yes/No	Comment														
YES	Pneumatic glycol pump at separator operating on gas with gas venting. Bradens open to vent.														

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

Predrill

Location ID: 334596

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: 259464 Type: WELL API Number: 045-07732 Status: PR Insp. Status: PR

Producing Well

Comment: Producing well

Facility ID: 282174 Type: WELL API Number: 045-11696 Status: PR Insp. Status: PR

Producing Well

Comment: Added to location 334596

Inspector Name: LONGWORTH, MIKE

Facility ID: 282176 Type: WELL API Number: 045-11695 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:

DWR Receipt Num: Owner Name: GPS : Lat Long

Field Parameters:

Sample Location:

Emission Control Burner (ECB):

Comment:

Pilot: Wildlife Protection Devices (fired vessels):

The subreport 'rptInsp13' could not be found at the

COGCC Comments

Comment	User	Date
Added location id # 311637 to this location (334596). Clean oil stain from around well GM 541-3. Stain was also on 02/06/2014 inspection doc # 663902766	longworm	01/30/2015

Attached Documents

You can go to COGCC Images (<https://cogcc.state.co.us/weblink/>) and search by document number:

Document Num	Description	URL
674700934	Well head stain and tank label missing	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3542324

ACTION REQUIRED

ANY ACTION REQUIRED items listed on this report indicate that the oil and gas facility or the oil and gas operations listed on the report may be in violation of the rules and regulations of the Colorado Oil and Conservation Commission (“COGCC”) and corrective action is required.

There is reasonable cause to believe that a violation of the Oil and Gas Conservation Act, or of any rule, regulation, or order of the Commission, or of any permit issued by the Commission, has occurred. The Operator’s compliance with this Inspection Report is required to resolve these alleged violations. This document requires the Operator to timely respond to the COGCC and to comply with directives as listed by the **Corrective Action Deadline Date**. Failure to do so will result in the issuance of a Notice of Alleged Violation and initiation of enforcement proceedings in which COGCC will seek monetary penalties for the alleged violations pursuant to § 34-60-121, C.R.S. and Rule 523, COGCC Rules of Practice and Procedure, 2 CCR 404-1. (Please note that the COGCC's penalty authority was recently increased to a maximum of \$15,000 per day and penalties are no longer capped at a maximum of \$10,000 per violation.)