

**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:

03/30/2015

Document Number:

674701176

Overall Inspection:

ACTION REQUIRED**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	335124	335124	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
Giboo, David		dgiboo@blm.gov	Petroleum Engineer Tech
Inspection, WPX	970-263-2716	COGCCInspectionReports@wpxenergy.com	WPX Inspection Mail Box

Compliance Summary:QtrQtr: SENW Sec: 32 Twp: 6S Range: 95W

Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Action Required	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
06/26/2014	675100122			SATISFACTORY			No
12/09/2013	663902474			SATISFACTORY			No
12/09/2013	663902470			SATISFACTORY	I		No

Inspector Comment:**Related Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status	
271633	WELL	PR	10/20/2004	GW	045-09923	FEDERAL PA 11-32	PR	<input checked="" type="checkbox"/>
271634	WELL	PR	10/20/2004	GW	045-09922	FEDERAL PA 311-32	PR	<input checked="" type="checkbox"/>
278408	WELL	PR	12/01/2010	GW	045-10878	FEDERAL PA 21-32	PR	<input checked="" type="checkbox"/>
278409	WELL	PR	01/14/2006	GW	045-10879	FEDERAL PA 321-32	PR	<input checked="" type="checkbox"/>
295260	WELL	PR	11/10/2008	GW	045-15709	FEDERAL PA 422-32	PR	<input checked="" type="checkbox"/>
295261	WELL	PR	11/10/2008	GW	045-15710	FEDERAL PA 421-32	PR	<input checked="" type="checkbox"/>
295262	WELL	PR	12/25/2008	GW	045-15711	FEDERAL PA 522-32	PR	<input checked="" type="checkbox"/>
295263	WELL	AL	12/12/2008	LO	045-15712	FEDERAL PA 521-32	AL	<input type="checkbox"/>

Inspector Name: LONGWORTH, MIKE

295264	WELL	PR	10/31/2008	GW	045-15713	FEDERAL PA 511-32	PR	<input checked="" type="checkbox"/>
295265	WELL	PR	03/31/2008	GW	045-15714	FEDERAL PA 411-32	PR	<input checked="" type="checkbox"/>
295266	WELL	PR	10/31/2008	GW	045-15715	FEDERAL PA 322-32	PR	<input checked="" type="checkbox"/>
295267	WELL	PR	10/31/2008	GW	045-15716	FEDERAL PA 312-32	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			
BATTERY	SATISFACTORY			
TANK LABELS/PLACARDS	SATISFACTORY			

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

Corrective Date: _____

Comment: 970-285-9377

Corrective Action: _____

Good Housekeeping:

Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
DEBRIS	ACTION REQUIRED	Black liner debris around reclaim areas of location.	Pick up debris.	04/30/2015

Spills:

Type	Area	Volume	Corrective action	CA Date
------	------	--------	-------------------	---------

☐ Multiple Spills and Releases?**Fencing/:**

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

Equipment:					
Type	#	Satisfactory/Action Required	Comment	Corrective Action	CA Date
Bird Protectors	6	SATISFACTORY			
Ancillary equipment	1	SATISFACTORY	Chemical container at wells		
Horizontal Heated Separator	12	SATISFACTORY			
Plunger Lift	11	SATISFACTORY			

Facilities:		<input type="checkbox"/> New Tank	Tank ID: _____		
Contents	#	Capacity	Type	SE GPS	
CONDENSATE	1	300 BBLS	STEEL AST		
S/A/V:	SATISFACTORY		Comment: Airs Id. # 04/1127/001		
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			

Facilities:		<input type="checkbox"/> New Tank	Tank ID: _____		
Contents	#	Capacity	Type	SE GPS	
PRODUCED WATER	1	200 BBLS	STEEL AST		
S/A/V:	SATISFACTORY		Comment: Airs Id. # 045/1127/002		
Corrective Action:				Corrective Date:	

Paint

Condition	Adequate
-----------	----------

Other (Content) _____

Other (Capacity) _____

Other (Type) _____

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Metal				

Corrective Action		Corrective Date	
Comment	Shared berm		

Venting:		
Yes/No	Comment	
YES	Bradens open to vent	

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

Predrill

Location ID: 335124

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: 271633 Type: WELL API Number: 045-09923 Status: PR Insp. Status: PR

Producing Well

Comment: Producing well

Facility ID: 271634 Type: WELL API Number: 045-09922 Status: PR Insp. Status: PR

Producing Well

Comment: Producing well

Facility ID: 278408	Type: WELL	API Number: 045-10878	Status: PR	Insp. Status: PR
<u>Producing Well</u>				
Comment: Producing well				
Facility ID: 278409	Type: WELL	API Number: 045-10879	Status: PR	Insp. Status: PR
<u>Producing Well</u>				
Comment: Producing well				
Facility ID: 295260	Type: WELL	API Number: 045-15709	Status: PR	Insp. Status: PR
<u>Producing Well</u>				
Comment: Producing well				
Facility ID: 295261	Type: WELL	API Number: 045-15710	Status: PR	Insp. Status: PR
<u>Producing Well</u>				
Comment: Producing well				
Facility ID: 295262	Type: WELL	API Number: 045-15711	Status: PR	Insp. Status: PR
<u>Producing Well</u>				
Comment: Producing well				
Facility ID: 295264	Type: WELL	API Number: 045-15713	Status: PR	Insp. Status: PR
<u>Producing Well</u>				
Comment: Producing well				
Facility ID: 295265	Type: WELL	API Number: 045-15714	Status: PR	Insp. Status: PR
<u>Producing Well</u>				
Comment: Producing well				
Facility ID: 295266	Type: WELL	API Number: 045-15715	Status: PR	Insp. Status: PR
<u>Producing Well</u>				
Comment: Producing well				
Facility ID: 295267	Type: WELL	API Number: 045-15716	Status: PR	Insp. Status: PR
<u>Producing Well</u>				
Comment: Producing well				
<u>Environmental</u>				
<u>Spills/Releases:</u>				
Type of Spill: _____	Description: _____		Estimated Spill Volume: _____	
Comment: _____				
Corrective Action: _____			Date: _____	
Reportable: _____	GPS: Lat _____	Long _____		
Proximity to Surface Water: _____	Depth to Ground Water: _____			
<u>Water Well:</u>				
			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? _____ 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 ? _____

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 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:

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
				MHSP	Pass	Secondary containment under chemical container
		Culverts	Fail			39.48357 -108.02845
		Compaction	Pass			
Culverts						
		Ditches	Fail			
		Gravel	Pass			
Seeding						
Waddles	Pass					
Ditches	Fail					
Gravel	Pass					
Other	Fail					Straw bales in ditches.

S/A/V: **ACTION REQUIRED**Corrective Date: **04/30/2015**

Comment: Ditch on north east side of location has sediment is built up over top of straw bales. Seeded slope wall is washing sediment into location ditch. Road ditches are washing and building up sediment. Culvert south of tank battery is built up with sediment.

CA: **Install and maintain BMPs to prevent migration of sediment.**Pits: ☐ NO SURFACE INDICATION OF PIT**Attached Documents**You can go to COGCC Images (<https://cogcc.state.co.us/weblink/>) and search by document number:

Inspector Name: LONGWORTH, MIKE

Document Num	Description	URL
674701177	Storm water photos	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3580628

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.)