

**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:
04/20/2015Document Number:
666800892Overall Inspection:
SATISFACTORY**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	277025	334585	Murray, Richard	<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
Contact, General		cogcc.inspections@encana.com	

Compliance Summary:QtrQtr: NESE Sec: 9 Twp: 7S Range: 93W**Inspector Comment:****Related Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status	
277025	WELL	PR	05/31/2006	GW	045-10599	HMU 9-9 (9W)	PR	<input checked="" type="checkbox"/>
277026	WELL	PR	02/22/2010	GW	045-10598	ROSE RANCH FEDERAL 9-8C (I9W)	PR	<input checked="" type="checkbox"/>
277027	WELL	PR	06/30/2009	GW	045-10597	HMU 9-8 (I9W)	PR	<input checked="" type="checkbox"/>
277028	WELL	PR	02/13/2010	GW	045-10596	ROSE RANCH FEDERAL 9-16A (I9W)	PR	<input checked="" type="checkbox"/>
277029	WELL	AL	05/24/2011	LO	045-10595	HMU 9-16C (I9W)	AL	<input checked="" type="checkbox"/>
277030	WELL	AL	05/24/2011	LO	045-10594	HMU 9-9D (I9W)	AL	<input checked="" type="checkbox"/>
277031	WELL	PR	02/04/2014	GW	045-10593	HMU 9-16 (I9W)	PR	<input checked="" type="checkbox"/>
277032	WELL	PR	05/01/2013	GW	045-10592	HMU 10-12D (I9W)	PR	<input checked="" type="checkbox"/>
277033	WELL	PR	02/16/2010	GW	045-10591	ROSE RANCH 10-13B (I9W)	PR	<input checked="" type="checkbox"/>
277111	WELL	PR	07/01/2009	GW	045-10600	ROSE RANCH 10-13A (I9W)	PR	<input checked="" type="checkbox"/>
412879	WELL	PR	03/03/2010	GW	045-18676	ROSE RANCH 16-1B (I9W)	PR	<input checked="" type="checkbox"/>
412880	WELL	PR	02/24/2010	GW	045-18677	ROSE RANCH FEDERAL 9-7D (I9W)	PR	<input checked="" type="checkbox"/>

Inspector Name: Murray, Richard

412881	WELL	PR	02/28/2010	GW	045-18678	ROSE RANCH FEDERAL 9-10 (I9W)	PR	<input checked="" type="checkbox"/>
412882	WELL	PR	02/19/2010	GW	045-18679	ROSE RANCH FEDERAL 10-12B (I9W)	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
BATTERY	SATISFACTORY	AIRS ID 045/1018/001		

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
Vertical Heated Separator	12	SATISFACTORY			
Emission Control Device	1	SATISFACTORY			
Gas Meter Run	1	SATISFACTORY			
Plunger Lift	12	SATISFACTORY			

Venting:

Yes/No	Comment
NO	

Flaring:

Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date

Predrill

Location ID: 277025

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: 277025 Type: WELL API Number: 045-10599 Status: PR Insp. Status: PR

Producing Well

Comment: Plunger lift

Facility ID: 277026 Type: WELL API Number: 045-10598 Status: PR Insp. Status: PR

Producing Well

Comment: Plunger lift

Facility ID: 277027 Type: WELL API Number: 045-10597 Status: PR Insp. Status: PR

Producing Well

Comment: Plunger lift

Facility ID: 277028	Type: WELL	API Number: 045-10596	Status: PR	Insp. Status: PR
Producing Well				
Comment: Plunger lift				
Facility ID: 277029	Type: WELL	API Number: 045-10595	Status: AL	Insp. Status: AL
Idle Well				
Purpose: <input type="checkbox"/> Shut In <input type="checkbox"/> Temporarily Abandoned Reminder: _____				
S/A/V: _____		CA Date: _____		
CA: _____				
Comment: No visal sign of well				
Facility ID: 277030	Type: WELL	API Number: 045-10594	Status: AL	Insp. Status: AL
Idle Well				
Purpose: <input type="checkbox"/> Shut In <input type="checkbox"/> Temporarily Abandoned Reminder: _____				
S/A/V: _____		CA Date: _____		
CA: _____				
Comment: No visal sign of well				
Facility ID: 277031	Type: WELL	API Number: 045-10593	Status: PR	Insp. Status: PR
Producing Well				
Comment: Plunger lift				
Facility ID: 277032	Type: WELL	API Number: 045-10592	Status: PR	Insp. Status: PR
Producing Well				
Comment: Plunger lift				
Facility ID: 277033	Type: WELL	API Number: 045-10591	Status: PR	Insp. Status: PR
Producing Well				
Comment: Plunger lift				
Facility ID: 277111	Type: WELL	API Number: 045-10600	Status: PR	Insp. Status: PR
Producing Well				
Comment: Plunger lift				
Facility ID: 412879	Type: WELL	API Number: 045-18676	Status: PR	Insp. Status: PR
Producing Well				
Comment: Plunger lift				
Facility ID: 412880	Type: WELL	API Number: 045-18677	Status: PR	Insp. Status: PR
Producing Well				
Comment: Plunger lift				
Facility ID: 412881	Type: WELL	API Number: 045-18678	Status: PR	Insp. Status: PR

Producing WellComment: **Plunger lift**

Facility ID: 412882 Type: WELL API Number: 045-18679 Status: PR Insp. Status: PR

Producing WellComment: **Plunger lift****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): Y

Comment:

Pilot: ON Wildlife Protection Devices (fired vessels): YES

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? Pass CM

CA CA Date

Guy line anchors marked? CM

CA CA Date

Inspector Name: Murray, Richard

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

1003c. Compacted areas have been cross ripped? Pass

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
		Check Dams	Pass			
Seeding	Pass					
		Culverts	Pass			
		Sediment Traps	Pass			
Rip Rap	Pass					
Ditches	Pass					
		Rip Rap	Pass			

Inspector Name: Murray, Richard

Retention Ponds	Pass				
Berms	Pass				
		Ditches	Pass		

S/A/V: SATISFACTOR
Y

Corrective Date: _____

Comment:

CA:

Pits: ☒ NO SURFACE INDICATION OF PIT