

**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

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Inspection Date:

04/27/2015

Document Number:

675201497

Overall Inspection:

SATISFACTORY**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	334663	334663	CONKLIN, CURTIS	<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
Encana,		cogcc.inspections@encana.com	All Inspections

Compliance Summary:QtrQtr: Lot 3 Sec: 30 Twp: 7S Range: 95W

Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Action Required	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
07/01/2014	675100178			SATISFACTORY			No

Inspector Comment:Follow up to inspection Doc#675100178. Issues from previous inspection have been resolved.**Related Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status	
271021	WELL	PR	06/06/2012	GW	045-09813	S.PARACHUTE FEDERAL 30-14	PR	<input checked="" type="checkbox"/>
278446	WELL	PR	06/06/2012	GW	045-10882	FEDERAL 30-1BB (PA30)	PR	<input checked="" type="checkbox"/>
284146	WELL	PR	06/06/2012	GW	045-12095	FEDERAL 20-13 (PA30)	PR	<input checked="" type="checkbox"/>
423625	WELL	PR	02/13/2012	GW	045-20780	Federal 29-4 (PA-30)	PR	<input checked="" type="checkbox"/>
423631	WELL	PR	02/13/2012	GW	045-20781	Federal Smith 30-2 (PA-30)	PR	<input checked="" type="checkbox"/>
423632	WELL	PR	02/13/2012	GW	045-20782	Federal Smith 19-15 (PA-30)	PR	<input checked="" type="checkbox"/>
423634	WELL	PR	02/13/2012	GW	045-20783	Federal 29-4BB (PA-30)	PR	<input checked="" type="checkbox"/>
423635	WELL	PR	02/13/2012	GW	045-20784	Federal 29-4C (PA-30)	PR	<input checked="" type="checkbox"/>
423636	WELL	PR	02/13/2012	GW	045-20785	Federal 20-13A (PA-30)	PR	<input checked="" type="checkbox"/>
423637	WELL	PR	02/28/2012	GW	045-20786	Federal 29-4A (PA-30)	PR	<input checked="" type="checkbox"/>

423641	WELL	PR	02/15/2012	GW	045-20787	Federal 19-16BB (PA-30)	PR	<input checked="" type="checkbox"/>
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Equipment:Location Inventory

Special Purpose Pits: _____	Drilling Pits: _____	Wells: 11	Production Pits: _____
Condensate Tanks: 4	Water Tanks: _____	Separators: 11	Electric Motors: _____
Gas or Diesel Mortors: _____	Cavity Pumps: _____	LACT Unit: _____	Pump Jacks: _____
Electric Generators: _____	Gas Pipeline: 2	Oil Pipeline: _____	Water Pipeline: _____
Gas Compressors: _____	VOC Combustor: _____	Oil Tanks: _____	Dehydrator Units: _____
Multi-Well Pits: _____	Pigging Station: 1	Flare: _____	Fuel Tanks: _____

Location**Lease Road:**

Type	Satisfactory/Action Required	comment	Corrective Action	Date
Access	SATISFACTORY			

Signs/Marker:

Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
TANK LABELS/PLACARDS	SATISFACTORY			
WELLHEAD	SATISFACTORY			

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

Corrective Date: _____

Comment: 800-791-7691

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
LOCATION	SATISFACTORY	Wire fence		

Equipment:

Type	#	Satisfactory/Action Required	Comment	Corrective Action	CA Date
Pig Station	1	SATISFACTORY			
Vertical Heated Separator	11	SATISFACTORY			
Other	1	SATISFACTORY	Chem unit on trailer		
Bird Protectors	3	SATISFACTORY			
Plunger Lift	11	SATISFACTORY			
Gas Meter Run	1	SATISFACTORY			

Facilities:☐ New Tank

Tank ID: _____

Contents	#	Capacity	Type	SE GPS
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Inspector Name: CONKLIN, CURTIS

METHANOL	1	1000 GAL	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>					
Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance	
Corrective Action					Corrective Date
Comment		w/ 500bbl tanks			
Facilities: <input type="checkbox"/> New Tank Tank ID: _____					
Contents	#	Capacity	Type	SE GPS	
CONDENSATE	3	300 BBLS	STEEL AST	39.414290,-108.032030	
S/A/V:	SATISFACTORY		Comment:		
Corrective Action:					Corrective Date:
<u>Paint</u>					
Condition	Adequate				
Other (Content) _____					
Other (Capacity) _____					
Other (Type) _____					
<u>Berms</u>					
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	
CONDENSATE	5	500 BBLS	STEEL AST	39.413640,-108.031180	
S/A/V:	SATISFACTORY		Comment:		
Corrective Action:					Corrective Date:
<u>Paint</u>					
Condition	Adequate				
Other (Content) _____					
Other (Capacity) _____					
Other (Type) _____					
<u>Berms</u>					
Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance	
Metal	Adequate	Walls Sufficient	Base Sufficient	Adequate	

Corrective Action		Corrective Date	
Comment			

Venting:	
Yes/No	Comment
NO	

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

Predrill

Location ID: 334663

Site Preparation:

Lease Road Adeq.: _____ Pads: _____ Soil Stockpile: _____

S/A/V: _____

Corrective Action: _____ Date: _____ CDP Num.: _____

Form 2A COAs:

Group	User	Comment	Date
OGLA	kubeczkod	<p>GENERAL SITE COAs:</p> <p>Operator must implement best management practices to contain any unintentional release of fluids, including any fluids conveyed via temporary surface pipelines.</p> <p>Operator must ensure secondary containment for any volume of fluids contained at well site during drilling and completion operations; including, but not limited to, construction of a berm or diversion dike, diversion/collection trenches within and/or outside of berms/dikes, site grading, or other comparable measures (i.e., best management practices (BMPs) associated with stormwater management) sufficiently protective of nearby surface water. Any berm constructed at the well pad location will be stabilized, inspected at regular intervals (at least every 14 days), and maintained in good condition.</p> <p>The moisture content of any drill cuttings in a cuttings pit, trench, or pile shall be as low as practicable to prevent accumulation of liquids greater than de minimis amounts. At the time of closure, the drill cuttings must also meet the applicable standards of table 910-1.</p> <p>Flowback and stimulation fluids must be sent to tanks to allow the sand to settle out before the fluids can be placed into any pipeline or pit located on the well pad. The flowback and stimulation fluid tanks must be placed on the well pad in an area with additional downgradient perimeter berming. The area where flowback fluids will be stored/reused must be constructed to be sufficiently impervious to contain any spilled or released material (per Rule 604.a.(4)).</p> <p>Berms or other containment devices shall be constructed in compliance with Rule 604.a.(4) around crude oil, condensate, and produced water storage tanks.</p>	05/11/2011

S/A/V: _____ **Comment:** Secondary containment in place around fluids.**CA:** _____ **Date:** _____**Wildlife BMPs:**

Inspector Name: CONKLIN, CURTIS

BMP Type	Comment
Wildlife	All wildlife stipulation and best management practices that apply, are applicable and that have been agreed to with the BLM and are presented in our approved South Parachute Geographic Area Plan for Oil and Gas Development (EA#COC140-2006-050) will be followed.

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:

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Summary of Operator Response to Landowner Issues:

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Onsite Inspection Memorandum Summarizing Discussions at Inspection as Attachment:

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Facility

Facility ID: 271021 Type: WELL API Number: 045-09813 Status: PR Insp. Status: PR

Producing Well

Comment: PR w/ plunger

Facility ID: 278446 Type: WELL API Number: 045-10882 Status: PR Insp. Status: PR

Producing Well

Comment: PR w/ plunger

Facility ID: 284146 Type: WELL API Number: 045-12095 Status: PR Insp. Status: PR

Producing Well

Comment: PR w/ plunger

Facility ID: 423625 Type: WELL API Number: 045-20780 Status: PR Insp. Status: PR

Producing Well

Comment: PR w/ plunger

Facility ID: 423631 Type: WELL API Number: 045-20781 Status: PR Insp. Status: PR

Producing Well

Comment: PR w/ plunger

Facility ID: 423632 Type: WELL API Number: 045-20782 Status: PR Insp. Status: PR

Producing Well

Comment: PR w/ plunger

Facility ID: 423634 Type: WELL API Number: 045-20783 Status: PR Insp. Status: PR

Producing Well

Comment: PR w/ plunger

Facility ID: 423635 Type: WELL API Number: 045-20784 Status: PR Insp. Status: PR

Producing Well

Comment: PR w/ plunger

Facility ID: 423636 Type: WELL API Number: 045-20785 Status: PR Insp. Status: PR

Producing Well

Comment: PR w/ plunger

Facility ID: 423637 Type: WELL API Number: 045-20786 Status: PR Insp. Status: PR

Producing Well

Comment: PR w/ plunger

Facility ID: 423641 Type: WELL API Number: 045-20787 Status: PR Insp. Status: PR

Producing Well

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

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: RANGELAND

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? Pass 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: RANGELAND

Reminder: _____

Comment: _____

Well plugged _____ Pit mouse/rat holes, cellars backfilled _____

Debris removed _____ No disturbance /Location never built _____

Access Roads Regraded _____ Contoured _____ Culverts removed _____

Inspector Name: CONKLIN, CURTIS

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
Retention Ponds	Pass	Sediment Traps	Pass			
Compaction	Pass	Culverts	Pass			
Berms	Pass	Compaction	Pass			
Gravel	Pass	Gravel	Pass			
Seeding	Pass					
Rip Rap	Pass					

S/A/V: SATISFACTOR
Y Corrective Date: _____

Comment: _____

CA: _____

Pits: ☒ NO SURFACE INDICATION OF PIT