

FORM

42

Rev  
03/15State of Colorado  
Oil and Gas Conservation Commission1120 Lincoln Street, Suite 801, Denver, Colorado 80203  
Phone: (303) 894-2100 Fax: (303) 894-2109

OGCC RECEPTION

Receive Date:

Document Number:

400840739

## FIELD OPERATIONS NOTICE

The Form 42 shall be submitted as required by Rule, Notice to Operators, Policy, or Condition of Approval.

A Form 42 Update shall be submitted to revise the scheduled date or time on a previous Form 42 - Advance Notice of Field Operations.

A Form 42 Update must be for the same well, location, or facility and for the same Field Operation as a previous Form 42.

NOTE: Operator's Contact for Advance Notices of Field Operations should be available 24 hours a day, 7 days a week and should have the most current scheduling information for the operation. Operator's Contact for other notices should be able to respond to questions regarding the reported information.

Update of a previous Form 42 Notice NOEntity InformationOGCC Operator Number: 96850Contact Person: Lynn CassCompany Name: WPX ENERGY ROCKY MOUNTAIN LLCPhone: (970) 2859377Address: 1001 17TH STREET - SUITE #1200Fax: ( )City: DENVER State: CO Zip: 80202Email: lynn.cass@wpxenergy.comAPI #: 05 - 045 - 15518 - 00

Facility ID: \_\_\_\_\_

Location ID: \_\_\_\_\_

Facility Name: AP 444-1-696☐ Submit By Other OperatorSec: 1 Twp: 6S Range: 96W QtrQtr: NWSELat: 39.548837 Long: -108.057073NOTICE OF INSPECTION CORRECTIVE ACTIONS PERFORMEDALL Corrective Actions required by field inspection document # 674701333 have been performed.Date of Completion: 05/15/2015 Site is ready for re-inspection.

I hereby certify all statements made in this form are, to the best of my knowledge, true, correct and complete.

Print Name: Lynn CassEmail: lynn.cass@wpxenergy.com

Signature: \_\_\_\_\_

Title: Drlg Supt

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

# Packing Slip 305959124



Customer PO	Sales Order 14529023	Shipment 811954908	Packing Slip	**** THIS IS NOT AN INVOICE DO NOT PAY FROM THIS DOCUMENT ****	Date: 05/14/2015
<b>Bill To</b> Cust Num: 129518 WPX ENERGY ROCKY MOUNTAIN, LLC EDI 3555 County Road 215 Parachute CO 81635		<b>Ship To</b> WPX ENERGY ROCKY MOUNTAIN, LLC Garfield Co/CL PARACHUTE CO 81635		<b>Interim Ship To</b>	
<b>AFE NUMBER: .</b> <b>LOCATION #: PARACHUTE MAILBOX</b> <b>ORDER CONTACT: SCOTT MEADE</b> <b>NEW CONSTRUCTION: .</b>		<b>INTERNAL CUSTOMER #: .</b> <b>LEASES: .</b> <b>CUSTOMER SUPERVISOR: .</b>		<b>JOB (PROJECT) #: .</b> <b>OTHER LEASES: DRILLING</b> <b>MAINTENANCE: .</b>	

Sort Seq: Order Confirmation

Item	Material Description	Qty UM	Unit Price	Disc%	Net Price	Net Total
10	61492 CEMENT QUIKRETE 80 LB BAG AFE NUMBER: WT 14369 LEASES: AP 22-24 PAD	8 EA	9.84 /EA	33.33%	6.56	52.48
	INTERNAL CUSTOMER #: JASON REED / SRS		JOB (PROJECT) #: 05/14/15			
20	625287 DSC MTL 17-3/4 IN X 1/4 IN CIRCLE / ONEAL AFE NUMBER: WT 14369 LEASES: AP 22-24 PAD	2 EA	40.40 /EA	17.50%	33.33	66.66
	INTERNAL CUSTOMER #: JASON REED / SRS		JOB (PROJECT) #: 05/14/15			
30	61492 CEMENT QUIKRETE 80 LB BAG AFE NUMBER: WT 19422 LEASES: AP 21-8 PAD	4 EA	9.84 /EA	33.33%	6.56	26.24
	INTERNAL CUSTOMER #: JASON REED / SRS		JOB (PROJECT) #: 05/14/15			
40	625287 DSC MTL 17-3/4 IN X 1/4 IN CIRCLE / ONEAL AFE NUMBER: WT 19422 LEASES: AP 21-8 PAD	2 EA	40.40 /EA	17.50%	33.33	66.66
	INTERNAL CUSTOMER #: JASON REED / SRS		JOB (PROJECT) #: 05/14/15			
50	61492 CEMENT QUIKRETE 80 LB BAG AFE NUMBER: WT 15445 LEASES: AP 34-1 PAD	4 EA	9.84 /EA	33.33%	6.56	26.24
	INTERNAL CUSTOMER #: JASON REED / SRS		JOB (PROJECT) #: 05/14/15			
60	625287 DSC MTL 17-3/4 IN X 1/4 IN CIRCLE / ONEAL AFE NUMBER: WT 15445 LEASES: AP 34-1 PAD	2 EA	40.40 /EA	17.50%	33.33	66.66
	INTERNAL CUSTOMER #: JASON REED / SRS		JOB (PROJECT) #: 05/14/15			

Questions: DNOW L.P. 3555 COUNTY ROAD 215 PARACHUTE CO 81635 Phone: 970-285-2217

\*\* HAZARDOUS MATERIAL D.O.T. 24 HOUR EMERGENCY RESPONSE NUMBER: 1-888-298-2344 (ACCESS CODE/CONTRACT # 333386)\*\*

We want to hear from you! Please send customer service comments and questions to [cp1@dnw.com](mailto:cp1@dnw.com)



Inspector Name: LONGWORTH, MIKE

FORM  
INSPRev  
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:

04/28/2015

Document Number:

674701333

Overall Inspection:

**ACTION REQUIRED****FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	335920	335920	LONGWORTH, MIKE	<input type="checkbox"/>	

**Operator Information:**

OGCC Operator Number: 96850

Name of Operator: WPX ENERGY ROCKY MOUNTAIN LLC

Address: 1001 17TH STREET - SUITE #1200

City: 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
Freeman, Sarah		sarah.freeman@state.co.us	
Inspection, WPX	970-263-2716	COGCCInspectionReports@wpxenergy.com	WPX Inspection Mail Box

**Compliance Summary:**

QtrQtr: NWSE Sec: 1 Twp: 6S Range: 96W

**Inspector Comment:**

Open conductor, cellar, and rat hole for AP 444-1-696. Permit expired 07/09/2010. Well status is XX in database.

**Related Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status	
294542	WELL	PR	06/24/2001	GW	045-15517	AP 44-1-696	PR	<input checked="" type="checkbox"/>
294544	WELL	XX	02/09/2009	LO	045-15518	AP 444-1-696	ND	<input checked="" type="checkbox"/>
294545	WELL	PR	06/24/2001	GW	045-15519	AP 443-1-696	PR	<input checked="" type="checkbox"/>
294851	WELL	PR	04/07/2009	GW	045-15613	AP 43-1-696	PR	<input checked="" type="checkbox"/>
422998	PIT	AC	04/27/2011		-	AP 34-1-696	AC	<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**

Inspector Name: LONGWORTH, MIKE

<b>Signs/Marker:</b>				
Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
CONTAINERS	SATISFACTORY			
TANK LABELS/PLACARDS	SATISFACTORY			
BATTERY	SATISFACTORY			
WELLHEAD	SATISFACTORY			

Emergency Contact Number (S/AV): SATISFACTORY

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

Comment: 970-285-9377

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

<b>Spills:</b>				
Type	Area	Volume	Corrective action	CA Date

☐ Multiple Spills and Releases?

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

<b>Equipment:</b>					
Type	#	Satisfactory/Action Required	Comment	Corrective Action	CA Date
Plunger Lift	3	SATISFACTORY			
Horizontal Heated Separator	3	SATISFACTORY			
Bird Protectors	8	SATISFACTORY			
Ancillary equipment	1	SATISFACTORY	Chemical container at wells		

<b>Facilities:</b>				
<input type="checkbox"/> New Tank		Tank ID: _____		
Contents	#	Capacity	Type	SE GPS
METHANOL	1	<50 BBLS	STEEL AST	39.548520,-108.057160
S/AV: SATISFACTORY		Comment: <u>At separators. No airs id on tank</u>		
Corrective Action: _____				Corrective Date: _____

<b>Paint</b>	
Condition	Adequate
Other (Content)	_____
Other (Capacity)	500 gallons
Other (Type)	_____

<b>Berms</b>				
Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Metal	Adequate	Walls Sufficient	Base Sufficient	Adequate



Inspector Name: LONGWORTH, MIKE

Corrective Action				Corrective Date	
Comment					
<b>Facilities:</b> <input type="checkbox"/> New Tank      Tank ID: _____					
Contents	#	Capacity	Type	SE GPS	
CONDENSATE	2	400 BBLS	HEATED STEEL AST	,	
S/A/V: SATISFACTORY		Comment: <span style="color:red">Airs id 045-2033-001</span>			
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					
Corrective Action				Corrective Date	
Comment					
<b>Facilities:</b> <input type="checkbox"/> New Tank      Tank ID: _____					
Contents	#	Capacity	Type	SE GPS	
PRODUCED WATER	4	400 BBLS	HEATED STEEL AST	39.548090,-108.057160	
S/A/V: SATISFACTORY		Comment: <span style="color:red">Airs id 045-2038-001</span>			
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					
<b>Venting:</b>					
Yes/No		Comment			
YES		<span style="color:red">Bradens open to vent</span>			
<b>Flaring:</b>					
Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date	

Inspector Name: LONGWORTH, MIKE

**Predrill**

Location ID: 335920

**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: 294542 Type: WELL API Number: 045-15517 Status: PR Insp. Status: PR

**Producing Well**

Comment: Producing well

Facility ID: 294544 Type: WELL API Number: 045-15518 Status: XX Insp. Status: ND

Facility ID: 294545 Type: WELL API Number: 045-15519 Status: PR Insp. Status: PR

**Producing Well**

Comment: Producing well

Facility ID: 294851 Type: WELL API Number: 045-15613 Status: PR Insp. Status: PR

Inspector Name: LONGWORTH, MIKE

**Producing Well**

Comment: **Producing well**

Facility ID: 422998 Type: PIT API Number: - Status: AC Insp. Status: AC

**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: \_\_\_\_\_

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? **Fail** CM **Open conductor, cellar, and rat hole for AP 444-1-696.**

CA **Close conductor, cellar, and rathole.** CA Date **05/29/2015**

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? \_\_\_\_\_



Inspector Name: LONGWORTH, MIKE

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: \_\_\_\_\_

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			
		Gravel	Pass			
		Culverts	Pass			
Berms	Pass					
				MHSP	Pass	
		Ditches	Pass			



Inspector Name: LONGWORTH, MIKE

S/AV: SATISFACTOR Corrective Date: \_\_\_\_\_  
Y \_\_\_\_\_

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

CA: \_\_\_\_\_

Pits: ☐ NO SURFACE INDICATION OF PIT

Pit Type: \_\_\_\_\_ Lined: \_\_\_\_\_ Pit ID: 422998 Lat: 39.549020 Long: -108.057100

**Lining:**

Liner Type: \_\_\_\_\_ Liner Condition: \_\_\_\_\_

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

**Fencing:**

Fencing Type: \_\_\_\_\_ Fencing Condition: \_\_\_\_\_

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

**Netting:**

Netting Type: \_\_\_\_\_ Netting Condition: \_\_\_\_\_

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

Anchor Trench Present: \_\_\_\_\_ Oil Accumulation: \_\_\_\_\_ 2+ feet Freeboard: \_\_\_\_\_

Pit (S/AV): \_\_\_\_\_ Comment: \_\_\_\_\_

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

Permit:	Facility ID	Permit Num	Expiration Date
	422998	2213757	

**COGCC Comments**

Comment	User	Date
Open conductor, cellar, and rat hole for AP 444-1-696. Permit expired 07/09/2010. Well status is XX in database.	longworm	04/28/2015

**Attached Documents**

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

Document Num	Description	URL
674701334	Conductor with expierd permit	<a href="http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3599531">http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3599531</a>

### **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.)