

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:
06/10/2015

Document Number:
666801063

Overall Inspection:
SATISFACTORY

FIELD INSPECTION FORM

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	<u>287372</u>	<u>334620</u>	<u>Murray, Richard</u>	<input type="checkbox"/>	

Operator Information:

OGCC Operator Number:	<u>100185</u>
Name of Operator:	<u>ENCANA OIL & GAS (USA) INC</u>
Address:	<u>370 17TH ST STE 1700</u>
City:	<u>DENVER</u> State: <u>CO</u> Zip: <u>80202-</u>

- 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: SESE Sec: 34 Twp: 6S Range: 92W

Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Action Required	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
05/06/2010	200286520	PR	PR	SATISFACTORY			No
10/06/2007	200123634	PR	PR	SATISFACTORY	I		No
07/08/2007	200118971	DG	WO	SATISFACTORY			No
06/13/2007	200114785	DG	DG	SATISFACTORY		Pass	No

Inspector Comment:

Action required items noted in previous inspection have been satisfied

Related Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status	
287372	WELL	PR	09/01/2007	GW	045-12992	LAST DANCE 34-15 (P34NE)	PR	<input checked="" type="checkbox"/>
287373	WELL	PR	09/04/2007	GW	045-12991	LAST DANCE 34-15C (P34NE)	PR	<input checked="" type="checkbox"/>
287374	WELL	PR	09/12/2007	GW	045-12990	LAST DANCE 34-16 (P34NE)	PR	<input checked="" type="checkbox"/>
287375	WELL	PR	09/08/2007	GW	045-12989	LAST DANCE 34-16C (P34NE)	PR	<input checked="" type="checkbox"/>
287376	WELL	PR	05/05/2008	GW	045-12988	LAST DANCE 34-10 (P34NE)	PR	<input checked="" type="checkbox"/>
287377	WELL	PR	05/21/2008	GW	045-12987	LAST DANCE 34-9C (P34NE)	PR	<input checked="" type="checkbox"/>
287378	WELL	PR	05/02/2008	GW	045-12986	LAST DANCE 34-9 (P34NE)	PR	<input checked="" type="checkbox"/>
287379	WELL	PR	05/02/2008	GW	045-12985	LAST DANCE 34-10C (P34NE)	PR	<input checked="" type="checkbox"/>

Equipment:		<u>Location Inventory</u>	
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

Signs/Marker:				
Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
BATTERY	SATISFACTORY			

Emergency Contact Number (S/A/V): SATISFACTORY Corrective Date: _____

Comment: _____

Corrective Action: _____

Spills:				
Type	Area	Volume	Corrective action	CA Date
<input type="checkbox"/> Multiple Spills and Releases?				

Equipment:					
Type	#	Satisfactory/Action Required	Comment	Corrective Action	CA Date
Emission Control Device	1	SATISFACTORY			
Plunger Lift	8	SATISFACTORY			
Horizontal Heated Separator	8	SATISFACTORY			

Venting:	
Yes/No	Comment
YES	Bradenhead valve open

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

Predrill

Location ID: 287372

Site Preparation:

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

S/AV: _____

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

Form 2A COAs:

S/AV: _____ **Comment:** _____

CA: _____ **Date:** _____

Wildlife BMPs:

S/AV: _____ **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: 287372 Type: WELL API Number: 045-12992 Status: PR Insp. Status: PR

Producing Well

Comment: **Plunger lift**

Facility ID: 287373 Type: WELL API Number: 045-12991 Status: PR Insp. Status: PR

Producing Well

Comment: **Plunger lift**

Facility ID: 287374 Type: WELL API Number: 045-12990 Status: PR Insp. Status: PR

Producing Well

Comment: **Plunger lift**

Facility ID: 287375 Type: WELL API Number: 045-12989 Status: PR Insp. Status: PR

Producing Well

Comment: Plunger lift

Facility ID: 287376 Type: WELL API Number: 045-12988 Status: PR Insp. Status: PR

Producing Well

Comment: Plunger lift, Bradenhead venting into 90 bbls roll off flat tank

Facility ID: 287377 Type: WELL API Number: 045-12987 Status: PR Insp. Status: PR

Producing Well

Comment: Plunger lift

Facility ID: 287378 Type: WELL API Number: 045-12986 Status: PR Insp. Status: PR

Producing Well

Comment: Plunger lift

Facility ID: 287379 Type: WELL API Number: 045-12985 Status: PR Insp. Status: PR

Producing Well

Comment: 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:

DWR Receipt Num: _____ Owner Name: _____ GPS: _____ Lat _____ Long _____

Field Parameters:

Sample Location: _____

Emission Control Burner (ECB): N

Comment: _____

Pilot: _____ 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? _____ CM _____
 CA _____ CA Date _____
 Guy line anchors marked? Pass CM _____
 CA _____ CA Date _____

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: _____

Inspector Name: Murray, Richard

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
		Culverts	Pass			
		Ditches	Pass			
Seeding	Pass					
Retention Ponds	Pass					
Berms	Pass					

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

Comment: _____

CA: _____

Pits: NO SURFACE INDICATION OF PIT