

**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:

06/30/2015

Document Number:

666801108

Overall Inspection:

SATISFACTORY**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	290562	334748	Murray, Richard	<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
, Inspections		COGCCInspectionReports@wpxenergy.com	Field Inspections

Compliance Summary:QtrQtr: NESW Sec: 32 Twp: 6S Range: 94W

Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Action Required	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
12/05/2014	666800376	PR	PR	ACTION REQUIRED			No
11/23/2012	663800600	PR	PR	SATISFACTORY	I		No
03/03/2010	200235908	PR	PR	SATISFACTORY			No
01/09/2009	200202336	PR	PR	ACTION REQUIRED			Yes
12/19/2008	200201662	PR	PR	SATISFACTORY			No
10/08/2008	200202795	CO	PR	SATISFACTORY			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	
290549	WELL	PR	02/16/2011	GW	045-14153	WELLS RWF 24-32	PR	<input checked="" type="checkbox"/>
290550	WELL	PR	09/28/2008	GW	045-14152	WELLS RWF 424-32	PR	<input checked="" type="checkbox"/>
290551	WELL	PR	09/30/2008	GW	045-14151	WELLS RWF 524-32	PR	<input checked="" type="checkbox"/>
290552	WELL	PR	05/11/2007	GW	045-14150	WELLS RWF 413-32	PR	<input checked="" type="checkbox"/>
290553	WELL	PR	05/11/2007	GW	045-14149	WELLS RWF 313-32	PR	<input checked="" type="checkbox"/>
290554	WELL	PR	05/11/2007	GW	045-14148	WELLS RWF 513-32	PR	<input checked="" type="checkbox"/>
290555	WELL	PR	05/11/2007	GW	045-14147	WELLS RWF 14-32	PR	<input checked="" type="checkbox"/>

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290556	WELL	PR	05/11/2007	GW	045-14146	WELLS RWF 314-32	PR	<input checked="" type="checkbox"/>
290557	WELL	PR	01/31/2008	GW	045-14145	WELLS RWF 414-32	PR	<input checked="" type="checkbox"/>
290558	WELL	PR	05/11/2007	GW	045-14144	WELLS RWF 323-32	PR	<input checked="" type="checkbox"/>
290559	WELL	PR	05/11/2007	GW	045-14143	WELLS RWF 23-32	PR	<input checked="" type="checkbox"/>
290560	WELL	PR	06/30/2008	GW	045-14142	WELLS RWF 523-32	PR	<input checked="" type="checkbox"/>
290561	WELL	PR	09/30/2008	GW	045-14141	WELLS RWF 423-32	PR	<input checked="" type="checkbox"/>
290562	WELL	PR	10/19/2008	GW	045-14140	WELLS RWF 324-32	PR	<input checked="" type="checkbox"/>
292165	WELL	PR	09/06/2007	GW	045-14611	WELLS RWF 13-32	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
BATTERY	SATISFACTORY			

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

Corrective Date: _____

Comment: _____

Corrective Action: _____

Spills:

Type	Area	Volume	Corrective action	CA Date
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☐ Multiple Spills and Releases?**Equipment:**

Type	#	Satisfactory/Action Required	Comment	Corrective Action	CA Date
Horizontal Heated Separator	15	SATISFACTORY			
Plunger Lift	15	SATISFACTORY			
Emission Control Device	1	SATISFACTORY	Disconnected		

Facilities:☐ New Tank

Tank ID: _____

Contents	#	Capacity	Type	SE GPS
CONDENSATE	1	300 BBLS	STEEL AST	,

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S/A/V:	SATISFACTORY	Comment:	Airs ID 045-1908-001		
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	
PRODUCED WATER	2	300 BBLS	STEEL AST	,	
S/A/V:	SATISFACTORY	Comment:	Centralized battery, Airs ID 045-1908-002		
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					
<u>Venting:</u>					
Yes/No	Comment				
YES	Bradenhead valves open				
<u>Flaring:</u>					
Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date	

Predrill

Location ID: 290562

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: 290549 Type: WELL API Number: 045-14153 Status: PR Insp. Status: PR

Producing Well

Comment: Plunger lift

Facility ID: 290550 Type: WELL API Number: 045-14152 Status: PR Insp. Status: PR

Producing Well

Comment: Plunger lift

Facility ID: 290551 Type: WELL API Number: 045-14151 Status: PR Insp. Status: PR

Producing Well

Comment: Plunger lift

Facility ID:	290552	Type:	WELL	API Number:	045-14150	Status:	PR	Insp. Status:	PR
Producing Well									
Comment:	Plunger lift								
Facility ID:	290553	Type:	WELL	API Number:	045-14149	Status:	PR	Insp. Status:	PR
Producing Well									
Comment:	Plunger lift								
Facility ID:	290554	Type:	WELL	API Number:	045-14148	Status:	PR	Insp. Status:	PR
Producing Well									
Comment:	Plunger lift								
Facility ID:	290555	Type:	WELL	API Number:	045-14147	Status:	PR	Insp. Status:	PR
Producing Well									
Comment:	Plunger lift								
Facility ID:	290556	Type:	WELL	API Number:	045-14146	Status:	PR	Insp. Status:	PR
Producing Well									
Comment:	Plunger lift								
Facility ID:	290557	Type:	WELL	API Number:	045-14145	Status:	PR	Insp. Status:	PR
Producing Well									
Comment:	Plunger lift								
Facility ID:	290558	Type:	WELL	API Number:	045-14144	Status:	PR	Insp. Status:	PR
Producing Well									
Comment:	Plunger lift								
Facility ID:	290559	Type:	WELL	API Number:	045-14143	Status:	PR	Insp. Status:	PR
Producing Well									
Comment:	Plunger lift								
Facility ID:	290560	Type:	WELL	API Number:	045-14142	Status:	PR	Insp. Status:	PR
Producing Well									
Comment:	Plunger lift								
Facility ID:	290561	Type:	WELL	API Number:	045-14141	Status:	PR	Insp. Status:	PR
Producing Well									
Comment:	Plunger lift								
Facility ID:	290562	Type:	WELL	API Number:	045-14140	Status:	PR	Insp. Status:	PR
Producing Well									
Comment:	Plunger lift								
Facility ID:	292165	Type:	WELL	API Number:	045-14611	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: _____

Complaint:

Tracking Num	Category	Assigned To	Description	Incident Date
200389859	OTHER	Lamont, Rich	Mrs. Wells stated that she noticed a condensate off load pipe had lost it's brace and was lying on the ground with a rag stuffed in the end.	11/19/2013
200389862	NOTIFICATION	Lamont, Rich	Mrs. Wells stated that she observed a condensate off load pipe was off it's support structure, laying on the ground with a rag stuffed in the end.	11/19/2013

Emission Control Burner (ECB): YComment: **Disconnected**Pilot: OFF 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 _____

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Guy line anchors marked? _____ 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: _____

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
		Ditches				
		Gravel				
Seeding	Pass					
Slope Roughening	Pass					

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Berms	Pass					
Sediment Traps	Pass					
Rip Rap	Pass					

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

Comment: _____

CA: _____

Pits: ☒ NO SURFACE INDICATION OF PIT