

**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:  
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:
	<u>290562</u>	<u>334748</u>	<u>Murray, Richard</u>	<input type="checkbox"/>	

**Operator Information:**

OGCC Operator Number:	<u>96850</u>
Name of Operator:	<u>WPX ENERGY ROCKY MOUNTAIN LLC</u>
Address:	<u>1001 17TH STREET - SUITE #1200</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
, 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	<b>ACTION REQUIRED</b>			No
11/23/2012	663800600	PR	PR	SATISFACTORY	I		No
03/03/2010	200235908	PR	PR	SATISFACTORY			No
01/09/2009	200202336	PR	PR	<b>ACTION REQUIRED</b>			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	✗
290557	WELL	PR	01/31/2008	GW	045-14145	WELLS RWF 414-32	PR	✗
290558	WELL	PR	05/11/2007	GW	045-14144	WELLS RWF 323-32	PR	✗
290559	WELL	PR	05/11/2007	GW	045-14143	WELLS RWF 23-32	PR	✗
290560	WELL	PR	06/30/2008	GW	045-14142	WELLS RWF 523-32	PR	✗
290561	WELL	PR	09/30/2008	GW	045-14141	WELLS RWF 423-32	PR	✗
290562	WELL	PR	10/19/2008	GW	045-14140	WELLS RWF 324-32	PR	✗
292165	WELL	PR	09/06/2007	GW	045-14611	WELLS RWF 13-32	PR	✗

**Equipment:** Location Inventory

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**

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

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

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

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

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

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

<b>Facilities:</b>					
<input type="checkbox"/> 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
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Corrective Action:		Corrective Date:	
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Paint

Condition	Adequate
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Other (Content) \_\_\_\_\_

Other (Capacity) \_\_\_\_\_

Other (Type) \_\_\_\_\_

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Metal	Adequate	Walls Sufficient	Base Sufficient	Adequate

Corrective Action		Corrective Date	
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Comment

**Facilities:**  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
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Corrective Action:		Corrective Date:	
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Paint

Condition	Adequate
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Other (Content) \_\_\_\_\_

Other (Capacity) \_\_\_\_\_

Other (Type) \_\_\_\_\_

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance

Corrective Action		Corrective Date	
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Comment

**Venting:**

Yes/No	Comment
YES	Bradenhead valves open

**Flaring:**

Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date

**Predrill**

Location ID: 290562

**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: 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
<b>Producing Well</b>				
Comment: <span style="color: red;">Plunger lift</span>				
Facility ID: 290553	Type: WELL	API Number: 045-14149	Status: PR	Insp. Status: PR
<b>Producing Well</b>				
Comment: <span style="color: red;">Plunger lift</span>				
Facility ID: 290554	Type: WELL	API Number: 045-14148	Status: PR	Insp. Status: PR
<b>Producing Well</b>				
Comment: <span style="color: red;">Plunger lift</span>				
Facility ID: 290555	Type: WELL	API Number: 045-14147	Status: PR	Insp. Status: PR
<b>Producing Well</b>				
Comment: <span style="color: red;">Plunger lift</span>				
Facility ID: 290556	Type: WELL	API Number: 045-14146	Status: PR	Insp. Status: PR
<b>Producing Well</b>				
Comment: <span style="color: red;">Plunger lift</span>				
Facility ID: 290557	Type: WELL	API Number: 045-14145	Status: PR	Insp. Status: PR
<b>Producing Well</b>				
Comment: <span style="color: red;">Plunger lift</span>				
Facility ID: 290558	Type: WELL	API Number: 045-14144	Status: PR	Insp. Status: PR
<b>Producing Well</b>				
Comment: <span style="color: red;">Plunger lift</span>				
Facility ID: 290559	Type: WELL	API Number: 045-14143	Status: PR	Insp. Status: PR
<b>Producing Well</b>				
Comment: <span style="color: red;">Plunger lift</span>				
Facility ID: 290560	Type: WELL	API Number: 045-14142	Status: PR	Insp. Status: PR
<b>Producing Well</b>				
Comment: <span style="color: red;">Plunger lift</span>				
Facility ID: 290561	Type: WELL	API Number: 045-14141	Status: PR	Insp. Status: PR
<b>Producing Well</b>				
Comment: <span style="color: red;">Plunger lift</span>				
Facility ID: 290562	Type: WELL	API Number: 045-14140	Status: PR	Insp. Status: PR
<b>Producing Well</b>				
Comment: <span style="color: red;">Plunger lift</span>				
Facility ID: 292165	Type: WELL	API Number: 045-14611	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: \_\_\_\_\_

**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	NOTIFICATI ON	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): Y

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

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