

**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 |
|----|----|----|----|
|----|----|----|----|

Inspection Date:  
08/18/2015Document Number:  
673402370

Overall Inspection:

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

|                     |             |        |                 |                          |             |
|---------------------|-------------|--------|-----------------|--------------------------|-------------|
| Location Identifier | Facility ID | Loc ID | Inspector Name: | On-Site Inspection       | 2A Doc Num: |
|                     | 222967      | 312943 | Waldron, Emily  | <input type="checkbox"/> |             |

**Operator Information:**OGCC Operator Number: 10372Name of Operator: X FIELD GAS LLCAddress: PO BOX 1313City: CRAIG State: CO Zip: 81626

- ☐ 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 |
|---------------|----------------|-----------------------|---------|
| haskins, jake | (970) 629-2233 | haskins2233@gmail.com |         |

**Compliance Summary:**QtrQtr: SWSW Sec: 27 Twp: 10N Range: 90W

| Insp. Date | Doc Num   | Insp. Type | Insp Status | Satisfactory /Action Required | PA P/F/I | Pas/Fail (P/F) | Violation (Y/N) |
|------------|-----------|------------|-------------|-------------------------------|----------|----------------|-----------------|
| 08/07/1996 | 500154582 | PR         | PR          |                               |          | Pass           | No              |
| 08/17/1995 | 500154581 | ID         | SI          |                               |          | Pass           | No              |

**Inspector Comment:****Related Facilities:**

| Facility ID | Type | Status | Status Date | Well Class | API Num   | Facility Name | Insp Status |                                     |
|-------------|------|--------|-------------|------------|-----------|---------------|-------------|-------------------------------------|
| 222967      | WELL | PR     | 12/22/1995  | GW         | 081-06329 | VILLARD 1-27  | 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 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****Lease Road:**

| Type   | Satisfactory/Action Required | comment  | Corrective Action   | Date       |
|--------|------------------------------|--|---|------------|
| Access | <b>ACTION REQUIRED</b>       | Road has developed rough spots and ruts and rills in places. | Maintain road to be in a reasonable condition, accessible and easily located. | 09/25/2015 |

Inspector Name: Waldron, Emily

| <b>Signs/Marker:</b> |                              |                      |                                       |            |
|----------------------|------------------------------|----------------------|---------------------------------------|------------|
| Type                 | Satisfactory/Action Required | Comment              | Corrective Action                     | CA Date    |
| BATTERY              | SATISFACTORY                 |                      |                                       |            |
| WELLHEAD             | ACTION REQUIRED              | No sign at wellhead. | Install sign to comply with rule 210. | 09/25/2015 |
| TANK LABELS/PLACARDS | ACTION REQUIRED              | No label on tank.    | Install sign to comply with rule 210. | 09/25/2015 |

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

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

Comment: 970-629-2233

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 |
| Pig Station                 | 1 | SATISFACTORY                 | 40.78939, -107.48178 |                   |         |
| Deadman # & Marked          | 4 | SATISFACTORY                 |                      |                   |         |
| Bird Protectors             |   | SATISFACTORY                 |                      |                   |         |
| Horizontal Heated Separator | 1 | SATISFACTORY                 | 40.78932, -107.48176 |                   |         |
| Gas Meter Run               | 1 | SATISFACTORY                 | 40.78931, -107.48168 |                   |         |

| <b>Facilities:</b>                |              |                |           |                       |  |
|-----------------------------------|--------------|----------------|-----------|-----------------------|--|
| <input type="checkbox"/> New Tank |              | Tank ID: _____ |           |                       |  |
| Contents                          | #            | Capacity       | Type      | SE GPS                |  |
|                                   | 1            |                | STEEL AST | 40.789420,-107.481490 |  |
| S/A/V:                            | SATISFACTORY |                | Comment:  |                       |  |
| Corrective Action:                |              |                |           | Corrective Date:      |  |

| <b>Paint</b>     |          |
|------------------|----------|
| Condition        | Adequate |
| Other (Content)  | _____    |
| Other (Capacity) | _____    |
| Other (Type)     | _____    |

| <b>Berms</b>      |  |                     |                     |                 |
|-------------------|--|---------------------|---------------------|-----------------|
| Type              | Capacity                                     | Permeability (Wall) | Permeability (Base) | Maintenance     |
| Earth             | Adequate                                     |                     |                     | Adequate        |
| Corrective Action |  |                     |                     | Corrective Date |
| Comment           | Vegetation and weeds growing on and in berm. |                     |                     |                 |

| <b>Venting:</b> |         |
|-----------------|---------|
| Yes/No          | Comment |
| NO              |         |

|                 |                              |         |                   |         |
|-----------------|------------------------------|---------|-------------------|---------|
| <b>Flaring:</b> |                              |         |                   |         |
| Type            | Satisfactory/Action Required | Comment | Corrective Action | CA Date |
|                 |                              |         |                   |         |

**Predrill**

Location ID: 222967

**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: 222967 Type: WELL API Number: 081-06329 Status: PR Insp. Status: PR

**Producing Well**

Comment: No production reported since October 2014.

**Environmental****Spills/Releases:**

Type of Spill: \_\_\_\_\_ Description: \_\_\_\_\_ Estimated Spill Volume: \_\_\_\_\_

Inspector Name: Waldron, Emily

|   |  |                      |
|---|--|----------------------|
| Comment: <input style="width:700px" type="text"/> |  |                      |
| Corrective Action: _____                          |  | Date: _____          |
| Reportable: _____                                 | GPS: Lat _____                                     | Long _____           |
| Proximity to Surface Water: _____                 | Depth to Ground Water: _____                       |                      |
| <b><u>Water Well:</u></b>                         |  |                      |
|   |  | Lat _____ Long _____ |
| DWR Receipt Num: _____                            | Owner Name: _____                                  | GPS : _____          |
| <b><u>Field Parameters:</u></b>                   |  |                      |
| <input style="width:300px" type="text"/>          |  |                      |
| <input style="width:450px" type="text"/>          |  |                      |
| 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: <input style="width:750px" type="text"/> |   |
| 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? _____ 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? _____                               |
| <b>RESTORATION AND REVEGETATION</b>               |   |
| <b><u>Cropland</u></b>                            |   |
| Top soil replaced _____                           | Recontoured _____ Perennial forage re-established _____   |

Inspector Name: Waldron, Emily

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 |
|------------------|-----------------|-------------------------|-----------------------|---------------|--------------------------|---------|
|                  |                 |                         |                       |               |                          |         |

S/A/V: **ACTION REQUIRED**

Corrective Date: **09/25/2015**

Comment: **No stormwater BMPs observed on location. No apparent soil migration on location. Access road is developing rough spots and rills.**

CA: **A stormwater plan utilizing appropriate and necessary BMPs shall be installed and maintained to prevent the migration of soil on pad, access roads and interim reclamation area. BMPs shall prevent site degradation from potential spills and/or releases from stored materials and equipment.**

**Pits:** ☐ NO SURFACE INDICATION OF PIT

**Attached Documents**

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

| Document Num | Description       | URL   |
|--------------|-------------------|---|
| 673402400    | Inspection Photos | <a href="http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3669486">http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3669486</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.)