

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:
10/22/2015

Document Number:
674701961

Overall Inspection:
SATISFACTORY

FIELD INSPECTION FORM

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	<u>383329</u>	<u>383329</u>	<u>LONGWORTH, MIKE</u>	<input type="checkbox"/>	

Operator Information:

OGCC Operator Number:	<u>96850</u>
Name of Operator:	<u>WPX ENERGY ROCKY MOUNTAIN LLC</u>
Address:	<u>PO BOX 370</u>
City:	<u>PARACHUTE</u> State: <u>CO</u> Zip: <u>81635</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
Inspection, WPX	970-263-2716	COGCCInspectionReports@wpxenergy.com	WPX Inspection Mail Box

Compliance Summary:

QtrQtr:	<u>NWNW</u>	Sec:	<u>36</u>	Twp:	<u>6S</u>	Range:	<u>95W</u>
---------	-------------	------	-----------	------	-----------	--------	------------

Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Action Required	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
03/20/2015	674701115			SATISFACTORY			No
08/25/2014	674700254			SATISFACTORY			No

Inspector Comment:

Related Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status	
301762	WELL	PR	05/31/2010	GW	045-18263	MAHAFFEY PA 414-25	PR	<input checked="" type="checkbox"/>
301763	WELL	PR	05/31/2010	GW	045-18264	MAHAFFEY PA 314-25	PR	<input checked="" type="checkbox"/>
301764	WELL	PR	05/31/2010	GW	045-18265	MAHAFFEY PA 14-25	PR	<input checked="" type="checkbox"/>
301765	WELL	PR	02/16/2011	GW	045-18266	MAHAFFEY PA 524-25	PR	<input checked="" type="checkbox"/>
301766	WELL	PR	07/31/2010	GW	045-18267	MAHAFFEY PA 424-25	PR	<input checked="" type="checkbox"/>
301767	WELL	PR	05/31/2010	GW	045-18268	MAHAFFEY PA 324-25	PR	<input checked="" type="checkbox"/>
301768	WELL	PR	05/31/2010	GW	045-18269	MAHAFFEY PA 11-36	PR	<input checked="" type="checkbox"/>
301769	WELL	PR	05/31/2010	GW	045-18270	MAHAFFEY PA 311-36	PR	<input checked="" type="checkbox"/>
301770	WELL	PR	05/31/2010	GW	045-18271	MAHAFFEY PA 411-36	PR	<input checked="" type="checkbox"/>

301771	WELL	PR	05/31/2010	GW	045-18272	MAHAFFEY PA 12-36	PR	<input checked="" type="checkbox"/>
301772	WELL	PR	05/31/2010	GW	045-18273	MAHAFFEY PA 312-36	PR	<input checked="" type="checkbox"/>
301773	WELL	PR	01/01/2012	GW	045-18274	MAHAFFEY PA 21-36	PR	<input checked="" type="checkbox"/>
301774	WELL	PR	05/31/2010	GW	045-18275	MAHAFFEY PA 321-36	PR	<input checked="" type="checkbox"/>
301775	WELL	PR	05/31/2010	GW	045-18276	MAHAFFEY PA 421-36	PR	<input checked="" type="checkbox"/>
301776	WELL	PR	05/31/2010	GW	045-18277	MAHAFFEY PA 22-36	PR	<input checked="" type="checkbox"/>
301777	WELL	PR	05/31/2010	GW	045-18278	MAHAFFEY PA 322-36	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

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

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

Comment: **970-285-9377**

Corrective Action: _____

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

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

Equipment:					
Type	#	Satisfactory/Action Required	Comment	Corrective Action	CA Date
Ancillary equipment	2	SATISFACTORY	Chemical containers at wells		
Horizontal Heated Separator	16	SATISFACTORY			
Plunger Lift	16	SATISFACTORY			
Bird Protectors	8	SATISFACTORY			

Facilities: New Tank Tank ID: _____

Contents	#	Capacity	Type	SE GPS	
PRODUCED WATER	1	300 BBLS	STEEL AST	,	
S/A/V: SATISFACTORY	Comment:				
Corrective Action:				Corrective Date:	

Paint

Condition	Adequate
-----------	----------

Other (Content) _____

Other (Capacity) _____

Other (Type) _____

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance	
Metal					
Corrective Action				Corrective Date	
Comment					

Facilities: New Tank Tank ID: _____

Contents	#	Capacity	Type	SE GPS	
PRODUCED WATER	1	200 BBLS	STEEL AST	,	
S/A/V: SATISFACTORY	Comment:				
Corrective Action:				Corrective Date:	

Paint

Condition	Adequate
-----------	----------

Other (Content) _____

Other (Capacity) _____

Other (Type) _____

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance	
Earth					
Corrective Action				Corrective Date	
Comment					

Facilities: New Tank Tank ID: _____

Contents	#	Capacity	Type	SE GPS
CONDENSATE	2	300 BBLS	STEEL AST	,

Inspector Name: LONGWORTH, MIKE

S/A/V:	SATISFACTORY	Comment:	Air id 045-2073-001			
Corrective Action:					Corrective Date:	
Paint						
Condition	Adequate					
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	
Comment						

Venting:		
Yes/No	Comment	
NO		

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

Predrill

Location ID: 383329

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: 301762 Type: WELL API Number: 045-18263 Status: PR Insp. Status: PR

Producing Well

Comment: Producing well

Facility ID: 301763 Type: WELL API Number: 045-18264 Status: PR Insp. Status: PR

Producing Well

Comment: Producing well

Facility ID: 301764 Type: WELL API Number: 045-18265 Status: PR Insp. Status: PR

Producing Well

Comment: Producing well

Facility ID: 301765	Type: WELL	API Number: 045-18266	Status: PR	Insp. Status: PR
Producing Well				
Comment: Producing well				
Facility ID: 301766	Type: WELL	API Number: 045-18267	Status: PR	Insp. Status: PR
Producing Well				
Comment: Producing well				
Facility ID: 301767	Type: WELL	API Number: 045-18268	Status: PR	Insp. Status: PR
Producing Well				
Comment: Producing well				
Facility ID: 301768	Type: WELL	API Number: 045-18269	Status: PR	Insp. Status: PR
Producing Well				
Comment: Producing well				
Facility ID: 301769	Type: WELL	API Number: 045-18270	Status: PR	Insp. Status: PR
Producing Well				
Comment: Producing well				
Facility ID: 301770	Type: WELL	API Number: 045-18271	Status: PR	Insp. Status: PR
Producing Well				
Comment: Producing well				
Facility ID: 301771	Type: WELL	API Number: 045-18272	Status: PR	Insp. Status: PR
Producing Well				
Comment: Producing well				
Facility ID: 301772	Type: WELL	API Number: 045-18273	Status: PR	Insp. Status: PR
Producing Well				
Comment: Producing well				
Facility ID: 301773	Type: WELL	API Number: 045-18274	Status: PR	Insp. Status: PR
Producing Well				
Comment: Producing well				
Facility ID: 301774	Type: WELL	API Number: 045-18275	Status: PR	Insp. Status: PR
Producing Well				
Comment: Producing well				
Facility ID: 301775	Type: WELL	API Number: 045-18276	Status: PR	Insp. Status: PR
Producing Well				
Comment: Producing well				
Facility ID: 301776	Type: WELL	API Number: 045-18277	Status: PR	Insp. Status: PR

Producing Well

Comment: **Producing well**

Facility ID: 301777 Type: WELL API Number: 045-18278 Status: PR Insp. Status: PR

Producing Well

Comment: **Producing well**

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? 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? _____ 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? _____

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
		Compaction	Pass			
				MHSP	Pass	
Gravel	Pass					
Seeding	Pass					
		Ditches	Pass			
		Gravel	Pass			
Compaction	Pass					

Inspector Name: LONGWORTH, MIKE

S/A/V: SATISFACTOR
Y

Corrective Date: _____

Comment:

CA:

Pits: NO SURFACE INDICATION OF PIT