

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:
12/10/2015

Document Number:
674702171

Overall Inspection:
SATISFACTORY

FIELD INSPECTION FORM

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	335594	335594	LONGWORTH, MIKE	<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
Inspections, General	970-285-2665	cogcc.inspections@encana.com	EnCana Inspection email

Compliance Summary:

QtrQtr:	<u>SENE</u>	Sec:	<u>29</u>	Twp:	<u>5S</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)
03/03/2015	671000143			SATISFACTORY			No
12/31/2013	663902581			ACTION REQUIRED	F		No
12/31/2013	663902582			ACTION REQUIRED			No

Inspector Comment:

Related Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
281254	WELL	PR	11/14/2006	GW	045-11414	N.PARACHUTE EF 16D H29A 595	PR
281255	WELL	PR	02/01/2014	GW	045-11415	N.PARACHUTE EF 15B H29A 595	PR
281256	WELL	PR	11/10/2005	GW	045-11416	N.PARACHUTE EF01B H29A 595	PR
281257	WELL	PR	11/24/2006	GW	045-11417	N.PARACHUTE EF16B H29A 595	PR
281258	WELL	PR	11/03/2006	GW	045-11418	N.PARACHUTE EF09B H29A 595	PR
281259	WELL	PR	11/08/2006	GW	045-11419	N. PARACHUTE EF01D H29A 595	PR
281260	WELL	PR	11/10/2005	GW	045-11420	N.PARACHUTE EF 15D H29A 59	PR
281261	WELL	PR	02/01/2014	GW	045-11421	N.PARACHUTE EF 10D H29A 595	PR
296524	WELL	AL	07/08/2011	LO	045-16054	N. PARACHUTE EF02A-29	AL

296525	WELL	AL	09/16/2010	LO	045-16055	N. PARACHUTE EF02C-29	AL	<input checked="" type="checkbox"/>
296526	WELL	AL	07/08/2011	LO	045-16056	N. PARACHUTE EF14B-20	AL	<input checked="" type="checkbox"/>
296527	WELL	AL	07/08/2011	LO	045-16057	N. PARACHUTE EF14A-20	AL	<input checked="" type="checkbox"/>
296528	WELL	PA	08/06/2014	GW	045-16058	N. PARACHUTE EF15D-20 H29A 5	PA	<input type="checkbox"/>
296529	WELL	AL	07/08/2011	LO	045-16059	N. PARACHUTE EF14D-20	AL	<input checked="" type="checkbox"/>
296530	WELL	PA	08/07/2014	LO	045-16060	N. PARACHUTE EF10C-20 H29A 5	PA	<input type="checkbox"/>
296531	WELL	AL	07/08/2011	LO	045-16061	N. PARACHUTE EF14C-20 H29A	AL	<input checked="" type="checkbox"/>
296532	WELL	PA	08/05/2014	GW	045-16062	N. PARACHUTE EF15B-20 H29A 5	PA	<input checked="" type="checkbox"/>
296533	WELL	PA	08/08/2014	GW	045-16063	N. PARACHUTE EF16D-20 H29A 5	PA	<input checked="" type="checkbox"/>
296534	WELL	PA	07/31/2014	GW	045-16064	N. PARACHUTE EF10A20 H29A 59	PA	<input checked="" type="checkbox"/>
296535	WELL	PA	08/06/2014	GW	045-16065	N. PARACHUTE EF01B-29 H29A 5	PA	<input checked="" type="checkbox"/>
433716	PIT	AC	07/25/2013		-	H29A 433716	AC	<input 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

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

Comment: _____

Corrective Action: _____

Spills:

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

Venting:

Yes/No	Comment

Flaring:

Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date

Predrill

Location ID: 335594

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: 296524 Type: WELL API Number: 045-16054 Status: AL Insp. Status: AL

Facility ID: 296525 Type: WELL API Number: 045-16055 Status: AL Insp. Status: AL

Facility ID: 296526 Type: WELL API Number: 045-16056 Status: AL Insp. Status: AL

Facility ID: 296527 Type: WELL API Number: 045-16057 Status: AL Insp. Status: AL

Facility ID: 296529 Type: WELL API Number: 045-16059 Status: AL Insp. Status: AL

Facility ID: 296531 Type: WELL API Number: 045-16061 Status: AL Insp. Status: AL

Facility ID: <u>296532</u>	Type: <u>WELL</u>	API Number: <u>045-16062</u>	Status: <u>PA</u>	Insp. Status: <u>PA</u>
Facility ID: <u>296533</u>	Type: <u>WELL</u>	API Number: <u>045-16063</u>	Status: <u>PA</u>	Insp. Status: <u>PA</u>
Facility ID: <u>296534</u>	Type: <u>WELL</u>	API Number: <u>045-16064</u>	Status: <u>PA</u>	Insp. Status: <u>PA</u>
Facility ID: <u>296535</u>	Type: <u>WELL</u>	API Number: <u>045-16065</u>	Status: <u>PA</u>	Insp. Status: <u>PA</u>

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? _____ 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? _____

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: 8 producing wells on location. No evidence of AL wells on location.

Corrective Action: _____ Date _____

Overall Final Reclamation Pass 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: _____ Corrective Date: _____

Comment: _____

CA: _____

Pits: NO SURFACE INDICATION OF PIT

