

**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:
12/16/2015Document Number:
674702205Overall Inspection:
SATISFACTORY**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	335414	335414	LONGWORTH, MIKE	<input type="checkbox"/>	

Operator Information:OGCC Operator Number: 96850Name of Operator: WPX ENERGY ROCKY MOUNTAIN LLCAddress: PO BOX 370City: PARACHUTE State: CO Zip: 81635

- ☐ 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: SENE Sec: 31 Twp: 6S Range: 95W

Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Action Required	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
11/14/2014	674700596			SATISFACTORY			No
06/23/2014	675100116			SATISFACTORY			No
09/13/2013	663902181			SATISFACTORY	F		No

Inspector Comment:**Related Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status	
257369	WELL	PR	12/01/2010	GW	045-07550	FEDERAL PA 42-31	PR	<input checked="" type="checkbox"/>
292426	WELL	PR	12/25/2008	GW	045-14722	FEDERAL PA 442-31	PR	<input checked="" type="checkbox"/>
293018	WELL	PR	10/18/2007	GW	045-14842	FEDERAL PA 432-31	PR	<input checked="" type="checkbox"/>
293038	WELL	PR	10/19/2007	GW	045-14843	FEDERAL PA 33-31	PR	<input checked="" type="checkbox"/>
293039	WELL	PR	10/19/2007	GW	045-14844	FEDERAL PA 333-31	PR	<input checked="" type="checkbox"/>
293040	WELL	PR	10/19/2007	GW	045-14845	FEDERAL PA 433-31	PR	<input checked="" type="checkbox"/>
293041	WELL	PR	09/30/2008	GW	045-14846	FEDERAL PA 533-31	PR	<input checked="" type="checkbox"/>
293042	WELL	PR	10/19/2007	GW	045-14847	FEDERAL PA 342-31	PR	<input checked="" type="checkbox"/>
293043	WELL	PR	12/25/2008	GW	045-14848	FEDERAL PA 542-31	PR	<input checked="" type="checkbox"/>

Inspector Name: LONGWORTH, MIKE

293046	WELL	PR	11/01/2008	GW	045-14849	FEDERAL PA 343-31	PR	<input checked="" type="checkbox"/>
293049	WELL	PR	11/07/2008	GW	045-14850	FEDERAL PA 443-31	PR	<input checked="" type="checkbox"/>
293051	WELL	PR	12/25/2008	GW	045-14851	FEDERAL PA 543-31	PR	<input checked="" type="checkbox"/>
293054	WELL	PR	11/07/2008	GW	045-14852	FEDERAL PA 332-31	PR	<input checked="" type="checkbox"/>
293055	WELL	PR	12/25/2008	GW	045-14853	FEDERAL PA 32-31	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	Incorrect Api # on sign for PA-31. Correct # 05-045-07550		
WELLHEAD	SATISFACTORY			
TANK LABELS/PLACARDS	SATISFACTORY			

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

Corrective Date: _____

Comment: 970-285-9377

Corrective Action: _____

Spills:

Type	Area	Volume	Corrective action	CA Date
------	------	--------	-------------------	---------

☐ Multiple Spills and Releases?**Fencing/:**

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

Equipment:

Type	#	Satisfactory/Action Required	Comment	Corrective Action	CA Date
Bird Protectors	9	SATISFACTORY			
Plunger Lift	14	SATISFACTORY			

Inspector Name: LONGWORTH, MIKE

Horizontal Heated Separator	15	SATISFACTORY			
-----------------------------	----	--------------	--	--	--

Facilities:		<input type="checkbox"/> New Tank	Tank ID: _____		
Contents	#	Capacity	Type	SE GPS	
PRODUCED WATER	1	<100 BBLS	STEEL AST	,	
S/A/V:	SATISFACTORY		Comment:		
Corrective Action:					Corrective Date:

Paint

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

Other (Content) _____

Other (Capacity) 80 bbl _____

Other (Type) _____

Berms

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

Facilities:		<input type="checkbox"/> New Tank	Tank ID: _____		
Contents	#	Capacity	Type	SE GPS	
CONDENSATE	2	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	Adequate	Walls Sufficient	Base Sufficient	Adequate
Corrective Action				Corrective Date
Comment				

Venting:		
Yes/No	Comment	
YES	Bradens are open to vent.	

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

Predrill

Location ID: 335414

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: 257369 Type: WELL API Number: 045-07550 Status: PR Insp. Status: PR

Producing Well

Comment: Producing well

Facility ID: 292426 Type: WELL API Number: 045-14722 Status: PR Insp. Status: PR

Producing Well

Comment: Producing well

Facility ID: 293018 Type: WELL API Number: 045-14842 Status: PR Insp. Status: PR

Producing Well

Comment: Producing well

Facility ID:	293038	Type:	WELL	API Number:	045-14843	Status:	PR	Insp. Status:	PR
Producing Well									
Comment:	Producing well								
Facility ID:	293039	Type:	WELL	API Number:	045-14844	Status:	PR	Insp. Status:	PR
Producing Well									
Comment:	Producing well								
Facility ID:	293040	Type:	WELL	API Number:	045-14845	Status:	PR	Insp. Status:	PR
Producing Well									
Comment:	Producing well								
Facility ID:	293041	Type:	WELL	API Number:	045-14846	Status:	PR	Insp. Status:	PR
Producing Well									
Comment:	Producing well								
Facility ID:	293042	Type:	WELL	API Number:	045-14847	Status:	PR	Insp. Status:	PR
Producing Well									
Comment:	Producing well								
Facility ID:	293043	Type:	WELL	API Number:	045-14848	Status:	PR	Insp. Status:	PR
Producing Well									
Comment:	Producing well								
Facility ID:	293046	Type:	WELL	API Number:	045-14849	Status:	PR	Insp. Status:	PR
Producing Well									
Comment:	Producing well								
Facility ID:	293049	Type:	WELL	API Number:	045-14850	Status:	PR	Insp. Status:	PR
Producing Well									
Comment:	Producing well								
Facility ID:	293051	Type:	WELL	API Number:	045-14851	Status:	PR	Insp. Status:	PR
Producing Well									
Comment:	Producing well								
Facility ID:	293054	Type:	WELL	API Number:	045-14852	Status:	PR	Insp. Status:	PR
Producing Well									
Comment:	Producing well								
Facility ID:	293055	Type:	WELL	API Number:	045-14853	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:

Lat _____ Long _____
 DWR Receipt Num: _____ Owner Name: _____ GPS : _____

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

Inspector Name: LONGWORTH, MIKE

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
		Check Dams	Pass			
Seeding	Pass					
		Culverts	Pass			
Ditches	Pass					
		Ditches	Pass			
Check Dams	Pass					

S/A/V: SATISFACTOR _____

Corrective Date: _____

Y

Comment: _____

CA: _____

Pits: ☒ NO SURFACE INDICATION OF PIT