

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:
12/18/2015

Document Number:
675202334

Overall Inspection:
SATISFACTORY

FIELD INSPECTION FORM

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	<u>334731</u>	<u>334731</u>	<u>CONKLIN, CURTIS</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
WPX, Energy		COGCCInspectionReports@wpxenergy.com	All Inspections

Compliance Summary:

QtrQtr:	<u>SWNW</u>	Sec:	<u>3</u>	Twp:	<u>7S</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)
11/25/2014	675200829			ACTION REQUIRED			No

Inspector Comment:

Follow up to inspection Doc#675200829

Related Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status	
292364	WELL	PR	09/20/2007	GW	045-14706	HENRY PA 23-3	PR	<input checked="" type="checkbox"/>
292366	WELL	PR	09/20/2007	GW	045-14707	HENRY PA 24-3	PR	<input checked="" type="checkbox"/>
292367	WELL	PR	09/20/2007	GW	045-14708	HENRY PA 13-3	PR	<input checked="" type="checkbox"/>
292368	WELL	PR	09/20/2007	GW	045-14705	HENRY PA 14-3	PR	<input checked="" type="checkbox"/>
298019	WELL	PR	08/28/2008	GW	045-17028	HENRY PA 424-3	PR	<input checked="" type="checkbox"/>
298020	WELL	PR	08/28/2008	GW	045-17029	HENRY PA 34-3	PR	<input checked="" type="checkbox"/>
298021	WELL	PR	08/28/2008	GW	045-17030	HENRY PA 43-4	PR	<input checked="" type="checkbox"/>
298022	WELL	PR	08/28/2008	GW	045-17031	HENRY PA 33-3	PR	<input checked="" type="checkbox"/>
298023	WELL	PR	08/28/2008	GW	045-17032	HENRY PA 314-3	PR	<input checked="" type="checkbox"/>
298027	WELL	PR	08/28/2008	GW	045-17033	HENRY PA 414-3	PR	<input checked="" type="checkbox"/>

298028	WELL	PR	08/28/2008	GW	045-17034	HENRY PA 514-3	PR	<input checked="" type="checkbox"/>
298029	WELL	PR	08/28/2008	GW	045-17035	HENRY PA 522-3	PR	<input checked="" type="checkbox"/>
298030	WELL	PR	08/28/2008	GW	045-17036	HENRY PA 323-3	PR	<input checked="" type="checkbox"/>
298031	WELL	PR	08/28/2008	GW	045-17037	HENRY PA 513-3	PR	<input checked="" type="checkbox"/>
298032	WELL	PR	08/28/2008	GW	045-17038	HENRY PA 413-3	PR	<input checked="" type="checkbox"/>
298033	WELL	PR	08/28/2008	GW	045-17039	HENRY 313-3	PR	<input checked="" type="checkbox"/>
298034	WELL	PR	08/28/2008	GW	045-17040	HENRY PA 423-3	PR	<input checked="" type="checkbox"/>
298035	WELL	PR	08/28/2008	GW	045-17041	HENRY PA 523-3	PR	<input checked="" type="checkbox"/>
298036	WELL	PR	08/28/2008	GW	045-17042	HENRY PA 623-3	PR	<input checked="" type="checkbox"/>
298037	WELL	PR	08/28/2008	GW	045-17043	HENRY PA 324-3	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	SATISFACTORY			

Signs/Marker:

Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
TANK LABELS/PLACARDS	SATISFACTORY			
WELLHEAD	SATISFACTORY			

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

Corrective Date: _____

Comment: 285-9377

Corrective Action: _____

Spills:

Type	Area	Volume	Corrective action	CA Date
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Multiple Spills and Releases?

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

Facilities: New Tank Tank ID: _____

Contents	#	Capacity	Type	SE GPS
CONDENSATE	2	300 BBLS	STEEL AST	,
S/A/V:	SATISFACTORY		Comment: AIRS ID 045-1901-001	
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				

Facilities: New Tank Tank ID: _____

Contents	#	Capacity	Type	SE GPS
PRODUCED WATER	2	300 BBLS	STEEL AST	,
S/A/V:	SATISFACTORY		Comment: AIRS ID 045-1901-002	
Corrective Action:				Corrective Date:

Paint

Condition	Adequate
Other (Content)	_____
Other (Capacity)	_____
Other (Type)	_____

Berms

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

Venting:

Yes/No	Comment
YES	Bradneheads

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

Predrill

Location ID: 334731

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: 292364 Type: WELL API Number: 045-14706 Status: PR Insp. Status: PR

Facility ID: 292366 Type: WELL API Number: 045-14707 Status: PR Insp. Status: PR

Facility ID: 292367 Type: WELL API Number: 045-14708 Status: PR Insp. Status: PR

Facility ID: 292368 Type: WELL API Number: 045-14705 Status: PR Insp. Status: PR

Facility ID: <u>298019</u>	Type: <u>WELL</u>	API Number: <u>045-17028</u>	Status: <u>PR</u>	Insp. Status: <u>PR</u>
Facility ID: <u>298020</u>	Type: <u>WELL</u>	API Number: <u>045-17029</u>	Status: <u>PR</u>	Insp. Status: <u>PR</u>
Facility ID: <u>298021</u>	Type: <u>WELL</u>	API Number: <u>045-17030</u>	Status: <u>PR</u>	Insp. Status: <u>PR</u>
Facility ID: <u>298022</u>	Type: <u>WELL</u>	API Number: <u>045-17031</u>	Status: <u>PR</u>	Insp. Status: <u>PR</u>
Facility ID: <u>298023</u>	Type: <u>WELL</u>	API Number: <u>045-17032</u>	Status: <u>PR</u>	Insp. Status: <u>PR</u>
Facility ID: <u>298027</u>	Type: <u>WELL</u>	API Number: <u>045-17033</u>	Status: <u>PR</u>	Insp. Status: <u>PR</u>
Facility ID: <u>298028</u>	Type: <u>WELL</u>	API Number: <u>045-17034</u>	Status: <u>PR</u>	Insp. Status: <u>PR</u>
Facility ID: <u>298029</u>	Type: <u>WELL</u>	API Number: <u>045-17035</u>	Status: <u>PR</u>	Insp. Status: <u>PR</u>
Facility ID: <u>298030</u>	Type: <u>WELL</u>	API Number: <u>045-17036</u>	Status: <u>PR</u>	Insp. Status: <u>PR</u>
Facility ID: <u>298031</u>	Type: <u>WELL</u>	API Number: <u>045-17037</u>	Status: <u>PR</u>	Insp. Status: <u>PR</u>
Facility ID: <u>298032</u>	Type: <u>WELL</u>	API Number: <u>045-17038</u>	Status: <u>PR</u>	Insp. Status: <u>PR</u>
Facility ID: <u>298033</u>	Type: <u>WELL</u>	API Number: <u>045-17039</u>	Status: <u>PR</u>	Insp. Status: <u>PR</u>
Facility ID: <u>298034</u>	Type: <u>WELL</u>	API Number: <u>045-17040</u>	Status: <u>PR</u>	Insp. Status: <u>PR</u>
Facility ID: <u>298035</u>	Type: <u>WELL</u>	API Number: <u>045-17041</u>	Status: <u>PR</u>	Insp. Status: <u>PR</u>
Facility ID: <u>298036</u>	Type: <u>WELL</u>	API Number: <u>045-17042</u>	Status: <u>PR</u>	Insp. Status: <u>PR</u>
Facility ID: <u>298037</u>	Type: <u>WELL</u>	API Number: <u>045-17043</u>	Status: <u>PR</u>	Insp. Status: <u>PR</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:

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
		Culverts	Pass			

S/A/V: _____

Corrective Date: _____

Comment:

Could not do complete stormwater inspection due to snow cover.

CA:

Pits:



NO SURFACE INDICATION OF PIT