

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



Inspection Date:
01/11/2016
Document Number:
666801818
Overall Inspection:
SATISFACTORY

FIELD INSPECTION FORM

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	<u>289341</u>	<u>311677</u>	<u>Murray, Richard</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
, Inspections		COGCCInspectionReports@wpxenergy.com	Field Inspections

Compliance Summary:

QtrQtr:	<u>SWNE</u>	Sec:	<u>5</u>	Twp:	<u>7S</u>	Range:	<u>94W</u>
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Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Action Required	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
02/14/2011	200298575	PR	PR	SATISFACTORY			No
05/04/2010	200287523	PR	PR	SATISFACTORY			No

Inspector Comment:

Related Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status	
289341	WELL	PR	11/26/2008	GW	045-13737	HARRIS RWF 431-5	PR	<input checked="" type="checkbox"/>
289342	WELL	PR		GW	045-13736	HARRIS RWF 533-5	PR	<input checked="" type="checkbox"/>
289343	WELL	PR		GW	045-13735	HARRIS RWF 333-5	PR	<input checked="" type="checkbox"/>
289344	WELL	PR	09/30/2008	GW	045-13734	HARRIS RWF 33-5	PR	<input checked="" type="checkbox"/>
289345	WELL	PR		GW	045-13733	HARRIS RWF 433-5	PR	<input checked="" type="checkbox"/>
289346	WELL	PR	12/30/2008	GW	045-13732	HARRIS RWF 331-5	PR	<input checked="" type="checkbox"/>
289347	WELL	PR	12/31/2008	GW	045-13731	HARRIS RWF 31-5	PR	<input checked="" type="checkbox"/>
289348	WELL	PR	11/30/2008	GW	045-13730	HARRIS RWF 332-5	PR	<input checked="" type="checkbox"/>
289349	WELL	PR	10/26/2007	GW	045-13729	HARRIS RWF 531-5	PR	<input checked="" type="checkbox"/>

289350	WELL	PR	10/31/2008	GW	045-13728	HARRIS RWF 32-5	PR	<input checked="" type="checkbox"/>
289351	WELL	PR	09/30/2008	GW	045-13727	HARRIS RWF 432-5	PR	<input checked="" type="checkbox"/>
289352	WELL	PR	09/30/2008	GW	045-13726	HARRIS RWF 532-5	PR	<input checked="" type="checkbox"/>
289353	WELL	PR	12/31/2008	GW	045-13725	HARRIS RWF 541-5	PR	<input checked="" type="checkbox"/>
289354	WELL	PR	10/26/2007	GW	045-13724	HARRIS RWF 341-5	PR	<input checked="" type="checkbox"/>
289355	WELL	PR	10/31/2008	GW	045-13723	HARRIS RWF 441-5	PR	<input checked="" type="checkbox"/>
289356	WELL	PR	10/31/2008	GW	045-13722	HARRIS RWF 342-5	PR	<input checked="" type="checkbox"/>
289357	WELL	AL	09/05/2008	LO	045-13721	HARRIS RWF 442-5	AL	<input type="checkbox"/>
289358	WELL	AL	09/05/2008	LO	045-13720	HARRIS RWF 542-5	AL	<input type="checkbox"/>
289359	WELL	AL	09/05/2008	LO	045-13719	HARRIS RWF 42-5	AL	<input type="checkbox"/>
289360	WELL	PR	09/30/2008	GW	045-13718	HARRIS RWF 43-5	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

Signs/Marker:				
Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
BATTERY	SATISFACTORY	AIRS ID 045-1912-001		

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

Comment: _____

Corrective Action: _____

Good Housekeeping:				
Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date

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

Equipment:				
Type: Emission Control Device	# 1	Satisfactory/Action Required:	SATISFACTORY	
Comment	Disconnected			
Corrective Action				Date:
Type: Plunger Lift	# 17	Satisfactory/Action Required:	SATISFACTORY	
Comment				
Corrective Action				Date:
Type: Ancillary equipment	# 3	Satisfactory/Action Required:	SATISFACTORY	
Comment	Chemical unit at wellhead			
Corrective Action				Date:
Type: Horizontal Heated Separator	# 20	Satisfactory/Action Required:	SATISFACTORY	
Comment				
Corrective Action				Date:

Facilities:				
<input type="checkbox"/> New Tank	Tank ID: _____			
Contents	#	Capacity	Type	SE GPS
PRODUCED WATER	2	300 BBLs	STEEL AST	
S/AR	SATISFACTORY		Comment:	In same berm as condensate tanks
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				

Facilities:				
<input type="checkbox"/> New Tank	Tank ID: _____			
Contents	#	Capacity	Type	SE GPS
CONDENSATE	2	300 BBLs	STEEL AST	39.467670,-107.910090
S/AR	SATISFACTORY		Comment:	
Corrective Action:				Corrective Date:

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<u>Paint</u>					
Condition	Adequate				
Other (Content)	_____				
Other (Capacity)	_____				
Other (Type)	_____				
<u>Berms</u>					
Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance	
Metal	Adequate	Walls Sufficient	Base Sufficient	Adequate	
Corrective Action				Corrective Date	
Comment					

Venting:

Yes/No	YES
Comment	Bradenhead valves open

Flaring:

Type		Satisfactory/Action Required	
Comment:			
Corrective Action:		Correct Action Date:	

Predrill

Location ID: 289341

Site Preparation:

Lease Road Adeq.: _____ Pads: _____ Soil Stockpile: _____

S/AR: _____

Corrective Action: _____ Date: _____ CDP Num.: _____

Form 2A COAs:

S/AR: _____ Comment: _____

CA: _____ Date: _____

Wildlife BMPs:

S/AR: _____ Comment: _____

CA: _____ Date: _____

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: 289341 Type: WELL API Number: 045-13737 Status: PR Insp. Status: PR

Producing Well

Comment: **Plunger lift**

Facility ID: 289342 Type: WELL API Number: 045-13736 Status: PR Insp. Status: PR

Producing Well

Comment: **Plunger lift**

Facility ID: 289343 Type: WELL API Number: 045-13735 Status: PR Insp. Status: PR

Producing Well

Comment: **Plunger lift**

Facility ID: 289344	Type: WELL	API Number: 045-13734	Status: PR	Insp. Status: PR
Producing Well				
Comment: Plunger lift				
Facility ID: 289345	Type: WELL	API Number: 045-13733	Status: PR	Insp. Status: PR
Producing Well				
Comment: Plunger lift				
Facility ID: 289346	Type: WELL	API Number: 045-13732	Status: PR	Insp. Status: PR
Producing Well				
Comment: Plunger lift				
Facility ID: 289347	Type: WELL	API Number: 045-13731	Status: PR	Insp. Status: PR
Producing Well				
Comment: Plunger lift				
Facility ID: 289348	Type: WELL	API Number: 045-13730	Status: PR	Insp. Status: PR
Producing Well				
Comment: Plunger lift				
Facility ID: 289349	Type: WELL	API Number: 045-13729	Status: PR	Insp. Status: PR
Producing Well				
Comment: Plunger lift				
Facility ID: 289350	Type: WELL	API Number: 045-13728	Status: PR	Insp. Status: PR
Producing Well				
Comment: Plunger lift				
Facility ID: 289351	Type: WELL	API Number: 045-13727	Status: PR	Insp. Status: PR
Producing Well				
Comment: Plunger lift				
Facility ID: 289352	Type: WELL	API Number: 045-13726	Status: PR	Insp. Status: PR
Producing Well				
Comment: Plunger lift				
Facility ID: 289353	Type: WELL	API Number: 045-13725	Status: PR	Insp. Status: PR
Producing Well				
Comment: Plunger lift				
Facility ID: 289354	Type: WELL	API Number: 045-13724	Status: PR	Insp. Status: PR
Producing Well				
Comment: Plunger lift				
Facility ID: 289355	Type: WELL	API Number: 045-13723	Status: PR	Insp. Status: PR

Producing Well

Comment: **Plunger lift**

Facility ID: 289356 Type: WELL API Number: 045-13722 Status: PR Insp. Status: PR

Producing Well

Comment: **Plunger lift**

Facility ID: 289360 Type: WELL API Number: 045-13718 Status: PR Insp. Status: PR

Producing Well

Comment: **Plunger lift**

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): Y

Comment: **Disconncted**

Pilot: OFF Wildlife Protection Devices (fired vessels): YES

Reclamation - Storm Water - Pit

Interim Reclamation:

Date Interim Reclamation Started: _____ Date Interim Reclamation Completed: _____

Land Use: _____

Comment: _____

1003a. Waste and Debris removed? Pass

CM _____

CA _____ CA Date _____

Unused or unneeded equipment onsite? Pass

CM **Landowners camper, conex box and fuel tank on location**

CA _____ CA Date _____

Pit, cellars, rat holes and other bores closed? Pass

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			
Waddles	Pass					
		Ditches	Pass			

Inspector Name: Murray, Richard

Berms	Pass					
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S/A/V: SATISFACTOR Corrective Date: _____
Y _____

Comment: Snow covered access road and location

CA: _____

Pits: NO SURFACE INDICATION OF PIT