

**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:

668004073

Overall Inspection:

SATISFACTORY**FIELD INSPECTION FORM**

| | | | | | |
|---------------------|-------------|--------|-----------------|--------------------|--------------------------|
| Location Identifier | Facility ID | Loc ID | Inspector Name: | On-Site Inspection | <input type="checkbox"/> |
| | 423126 | 423134 | DURAN, JOHN | 2A Doc Num: | |

Operator Information:OGCC Operator Number: 100264Name of Operator: XTO ENERGY INCAddress: 382 CR 3100City: AZTEC State: NM Zip: 87410

- ☐ 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 |
|------------------|---------------------------|-------------------------------|-----------------------------|
| Trujillo, Irwin | 719-846-0272/719-859-2264 | irwin_trujillo@xtoenergy.com | Sr. Env. Tech., Raton Basin |
| Harrison, Lyndon | 505-333-3100 | Lyndon_Harrison@xtoenergy.com | |
| Begano, Mary | 719-859-1918/719-846-2102 | mary_begano@xtoenergy.com | All Inspections |

Compliance Summary:QtrQtr: NWNW Sec: 1 Twp: 34S Range: 68W

| Insp. Date | Doc Num | Insp. Type | Insp Status | Satisfactory /Action Required | PA P/F/I | Pas/Fail (P/F) | Violation (Y/N) |
|------------|-----------|------------|-------------|-------------------------------|----------|----------------|-----------------|
| 04/27/2012 | 668000162 | PR | PR | SATISFACTORY | | | No |

Inspector Comment:**Related Facilities:**

| Facility ID | Type | Status | Status Date | Well Class | API Num | Facility Name | Insp Status | |
|-------------|------|--------|-------------|------------|-----------|---------------------|-------------|-------------------------------------|
| 423126 | WELL | PR | 09/03/2011 | GW | 071-09865 | APACHE CANYON 01-04 | PR | <input checked="" type="checkbox"/> |

Equipment:Location Inventory

| | | | |
|------------------------------|-------------------------|----------------------|---------------------------|
| Special Purpose Pits: _____ | Drilling Pits: <u>1</u> | Wells: <u>1</u> | Production Pits: <u>1</u> |
| Condensate Tanks: _____ | Water Tanks: <u>2</u> | Separators: <u>1</u> | Electric Motors: <u>1</u> |
| Gas or Diesel Mortors: _____ | Cavity Pumps: _____ | LACT Unit: _____ | Pump Jacks: <u>1</u> |
| Electric Generators: _____ | Gas Pipeline: <u>1</u> | Oil Pipeline: _____ | Water Pipeline: <u>1</u> |
| Gas Compressors: <u>1</u> | VOC Combustor: _____ | Oil Tanks: _____ | Dehydrator Units: _____ |
| Multi-Well Pits: _____ | Pigging Station: _____ | Flare: _____ | Fuel Tanks: _____ |

Location

Inspector Name: DURAN, JOHN

| Lease Road: | | | | |
|--------------------|------------------------------|---------|-------------------|------|
| Type | Satisfactory/Action Required | comment | Corrective Action | Date |
| | | | | |

| Signs/Marker: | | | | |
|----------------------|------------------------------|---------------|-------------------|---------|
| Type | Satisfactory/Action Required | Comment | Corrective Action | CA Date |
| TANK LABELS/PLACARDS | SATISFACTORY | Has capacity. | | |
| WELLHEAD | SATISFACTORY | | | |

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 |
| <input type="checkbox"/> Multiple Spills and Releases? | | | | |

| Fencing/: | | | | |
|------------------|------------------------------|---------|-------------------|---------|
| Type | Satisfactory/Action Required | Comment | Corrective Action | CA Date |
| | | | | |

| Equipment: | | | | |
|--------------------------|-----|--|--|-------------|
| Type: Deadman # & Marked | # 5 | Satisfactory/Action Required: SATISFACTORY | | |
| Comment | | | | |
| Corrective Action | | | | Date: _____ |

| Venting: | |
|-----------------|--|
| Yes/No | |
| Comment | |

| Flaring: | | | |
|--------------------|--|------------------------------|--|
| Type | | Satisfactory/Action Required | |
| Comment: | | | |
| Corrective Action: | | Correct Action Date: | |

| Predrill | | | |
|----------------------------|-------|-----------------|--|
| Location ID: <u>423126</u> | | | |
| Site Preparation: | | | |
| Lease Road Adeq.: | Pads: | Soil Stockpile: | |
| | | | |
| S/AR: | | | |
| Corrective Action: | Date: | CDP Num.: | |
| | | | |

Form 2A COAs:

| Group | User | Comment | Date |
|-------|---------|--|------------|
| OGLA | koepsar | <p>Notify the COGCC Oil and Gas Location Assessment (OGLA) specialist for South Eastern Colorado (Arthur Koepsell; email arthur.koepsell@state.co.us) 72 hours prior to spudding the well.</p> <p>Notify the COGCC Oil and Gas Location Assessment (OGLA) specialist for South Eastern Colorado (Arthur Koepsell; email arthur.koepsell@state.co.us) 72 hours prior to commencing frac operations.</p> | 03/30/2011 |
| OGLA | koepsar | <p>Due to the shallow soils and underlying fractured bed rock the following will apply: Location is in a sensitive area because of potential for adverse impacts to ground water/surface water; therefore all pits will be lined.</p> <p>Location is on steep slopes; therefore the cut and fill slopes should be constructed in such a manner to manage site drainage and slope stability. The slopes should be stabilized immediately after the location has been constructed.</p> <p>Operator must implement site-specific best management practices in accordance with good engineering practices, including, but not limited to, construction of a berm or diversion dike, site grading, or other comparable measures, sufficient to prevent a release of drilling, completion, produced fluids, or chemical products from migrating off of the oil and gas location.</p> | 03/30/2011 |

S/AR: _____ **Comment:** _____

CA: _____ **Date:** _____

Wildlife BMPs:

| BMP Type | Comment |
|--|---|
| Wildlife | Wildlife BMP required for Raton Basin utilize bear proof dumpsters and trash receptacles for food related trash at all facilities that generate such trash. |
| Material Handling and Spill Prevention | Spill Prevention and Counter Measures (SPCC) for the Raton Basin is on file at the XTO Energy Inc. office. The Field SWMP and Site Specific SWMP each address SPCC during construction operations. |
| Construction | <p>Prior to construction perimeter controls will be installed utilizing cuttings from the clearing operations. Brush Barriers shall be placed down gradient of the disturbance. Once the well pad has been constructed a variety of B.M.P.'s shall be utilized for the site specific conditions. These devices may include but are not limited to:</p> <ul style="list-style-type: none"> • Brush Barriers • Dirt Berm/Bar Ditch • Clean Water Run on Diversion • Seeding • Erosion Control Blankets • Mulch Tackifier • Rip-Rap <p>During construction each site will be inspected every 14 days and 72 hours after any major storm event. These inspections will be recorded and maintained at the XTO office. Repairs shall be completed within 7 days of the initial inspection. Any modifications shall be revised on the site plan and then implemented at the site.</p> |
| Storm Water/Erosion Control | <p>A Field Wide Stormwater Management Plan (SWMP) for the Raton Basin is on file at the XTO Energy Inc. office. A Site Specific SWMP with a Site Plan will be developed for each location and can be found in:</p> <ul style="list-style-type: none"> • Appendix F- Apache Canyon Lease • Appendix G- Golden Eagle Lease • Appendix H- Hill Ranch Lease • Appendix I- New Elk Lease |

S/AR: _____ **Comment:** _____

CA: _____ **Date:** _____

Inspector Name: DURAN, JOHN

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: 423126 Type: WELL API Number: 071-09865 Status: PR Insp. Status: PR

Producing Well

Comment: PR

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:

Inspector Name: DURAN, JOHN

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

Land Use: RANGELAND, TIMBER

Comment: _____

1003a. Waste and Debris removed? _____

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 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: RANGELAND, TIMBER

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 _____

Inspector Name: DURAN, JOHN

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 |
|------------------|-----------------|-------------------------|-----------------------|---------------|--------------------------|---------|
| Gravel | Pass | Gravel | Pass | | | |

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

Comment: _____

CA: _____

Pits: ☒ NO SURFACE INDICATION OF PIT