

**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:

02/19/2016

Document Number:

675102300

Overall Inspection:

SATISFACTORY**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	413591	413591	GRANAHAN, KYLE	<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
, WPX		COGCCInspectionReports@wpxenergy.com	All inspections

Compliance Summary:QtrQtr: Lot 2 Sec: 24 Twp: 1S Range: 98W

Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Action Required	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
05/05/2015	675101343			SATISFACTORY	I		No

Inspector Comment:*All corrective actions have been implemented from inspection doc # 675101343***Related Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status	
411886	WELL	PR	04/17/2009	GW	103-11503	FEDERAL NRG 434-13-198	PR	<input checked="" type="checkbox"/>
411887	WELL	PR	04/17/2009	GW	103-11504	FEDERAL RGU 341-24-198	PR	<input checked="" type="checkbox"/>
411888	WELL	PR	04/17/2009	GW	103-11505	FEDERAL RGU 541-24-198	PR	<input checked="" type="checkbox"/>
411889	WELL	PR	01/07/2010	GW	103-11506	FEDERAL RGU 531-24-198	PR	<input checked="" type="checkbox"/>
419633	WELL	PR	06/10/2013	GW	103-11804	Federal RGU 22-24-198	PR	<input checked="" type="checkbox"/>
419634	WELL	PR	06/10/2013	GW	103-11805	Federal RGU 421-24-198	PR	<input checked="" type="checkbox"/>
419636	WELL	PR	06/10/2013	GW	103-11806	Federal RGU 21-24-198	PR	<input checked="" type="checkbox"/>
419637	WELL	PR	12/10/2014	GW	103-11807	Federal RGU 331-24-198	PR	<input checked="" type="checkbox"/>
419640	WELL	PR	04/01/2013	GW	103-11808	Federal RGU 332-24-198	PR	<input checked="" type="checkbox"/>
440441	SPILL OR RELEASE	CL	12/12/2014		-	SPILL/RELEASE POINT	CL	<input type="checkbox"/>

Equipment:Location Inventory

Special Purpose Pits: _____	Drilling Pits: <u>2</u>	Wells: <u>19</u>	Production Pits: _____
Condensate Tanks: <u>6</u>	Water Tanks: <u>6</u>	Separators: <u>4</u>	Electric Motors: _____
Gas or Diesel Motors: _____	Cavity Pumps: _____	LACT Unit: _____	Pump Jacks: _____
Electric Generators: _____	Gas Pipeline: <u>1</u>	Oil Pipeline: _____	Water Pipeline: <u>2</u>
Gas Compressors: _____	VOC Combustor: <u>1</u>	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
WELLHEAD	SATISFACTORY			
TANK LABELS/PLACARDS	SATISFACTORY			
BATTERY	SATISFACTORY			

Emergency Contact Number (S/AR): SATISFACTORY

Corrective Date: _____

Comment: 970-285-9377

Corrective Action: _____

Good Housekeeping:

Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date

Spills:

Type	Area	Volume	Corrective action	CA Date

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

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

Equipment:

Type: Emission Control Device	# 1	Satisfactory/Action Required: SATISFACTORY
Comment		
Corrective Action		Date: _____

Type: Ancillary equipment	# 3	Satisfactory/Action Required:	SATISFACTORY
Comment	Chemical tote w/secondary containment.		
Corrective Action			Date:
Type: Other	# 1	Satisfactory/Action Required:	SATISFACTORY
Comment	Production water pump house		
Corrective Action			Date:
Type: Bird Protectors	# 16	Satisfactory/Action Required:	SATISFACTORY
Comment			
Corrective Action			Date:
Type: Deadman # & Marked	#	Satisfactory/Action Required:	SATISFACTORY
Comment			
Corrective Action			Date:
Type: Horizontal Heated Separator	# 10	Satisfactory/Action Required:	SATISFACTORY
Comment			
Corrective Action			Date:
Type: Pig Station	# 1	Satisfactory/Action Required:	SATISFACTORY
Comment			
Corrective Action			Date:
Type: Dehydrator	# 1	Satisfactory/Action Required:	SATISFACTORY
Comment			
Corrective Action			Date:
Type: Plunger Lift	# 9	Satisfactory/Action Required:	SATISFACTORY
Comment			
Corrective Action			Date:

Facilities: ☐ New Tank Tank ID: _____

Contents	#	Capacity	Type	SE GPS
PRODUCED WATER	4	500 BBLS	HEATED STEEL AST	,

S/AR	SATISFACTORY	Comment:	
Corrective Action:		Corrective Date:	

Paint

Condition	Adequate
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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	
CONDENSATE	4	500 BBLS	HEATED STEEL AST	,	
S/AR	SATISFACTORY		Comment: _____		
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 _____					
Venting:					
Yes/No	NO				
Comment _____					
Flaring:					
Type			Satisfactory/Action Required		
Comment: _____					
Corrective Action: _____				Correct Action Date:	
Predrill					
Location ID: 413591					
Site Preparation:					
Lease Road Adeq.: _____		Pads: _____		Soil Stockpile: _____	
S/AR: _____					
Corrective Action: _____		Date: _____		CDP Num.: _____	
Form 2A COAs:					
Group	User	Comment			Date
OGLA	kubeczkod	Operator must implement best management practices to contain any unintentional release of fluids.			08/30/2010
OGLA	kubeczkod	Operator must ensure 110 percent secondary containment for any volume of fluids contained at well site during drilling and completion operations; including, but not limited to, construction of a berm or diversion dike, diversion/collection trenches within and/or outside of berms/dikes, site grading, or other comparable measures sufficiently protective of nearby surface water. If fluids are conveyed via pipeline, operator must implement best management practices to contain any unintentional release of fluids.			08/30/2010

Inspector Name: GRANAHAN, KYLE

OGLA	kubeczkod	Reserve pit must be lined. If the existing reserve/drilling or multi-well pit is not lined, then it must be lined in accordance with COGCC Rule 904 prior to being used.	08/30/2010
OGLA	kubeczkod	No portion of any pit that will be used to hold liquids shall be constructed on fill material, unless the pit and fill slope are designed and certified by a professional engineer, subject to review and approval by the director prior to construction of the pit. The construction and lining of the pit shall be supervised by a professional engineer or their agent. The entire base of the pit must be in cut.	08/30/2010
OGLA	kubeczkod	The moisture content of any drill cuttings in a cuttings pit, trench, or pile shall be as low as practicable to prevent accumulation of liquids greater than de minimis amounts. At the time of closure, the drill cuttings must also meet the applicable standards of table 910-1.	08/30/2010
OGLA	kubeczkod	Location is in a sensitive area because of close proximity to surface water, therefore, operator must ensure 110 percent secondary containment for any volume of fluids contained at well site during drilling and completion operations.	08/30/2010

S/AR: SATISFACTORY **Comment:** COA's met at time of inspection

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: 411886 Type: WELL API Number: 103-11503 Status: PR Insp. Status: PR

Producing Well

Comment: Well producing, No sign of cellar/rathole present, Bradenhead, Surface and production casing monitored, No venting/leaks present at time of inspection.

Facility ID: 411887 Type: WELL API Number: 103-11504 Status: PR Insp. Status: PR

Producing Well

Comment: Well producing, No sign of cellar/rathole present, Bradenhead, Surface and production casing monitored, No venting/leaks present at time of inspection.

Facility ID: 411888 Type: WELL API Number: 103-11505 Status: PR Insp. Status: PR

Producing Well

Comment: Well producing, No sign of cellar/rathole present, Bradenhead, Surface and production casing monitored, No venting/leaks present at time of inspection.

Facility ID: 411889 Type: WELL API Number: 103-11506 Status: PR Insp. Status: PR

Producing Well

Comment: Well producing, No sign of cellar/rathole present, Bradenhead, Surface and production casing monitored, No venting/leaks present at time of inspection.

Facility ID: 419633 Type: WELL API Number: 103-11804 Status: PR Insp. Status: PR

Producing Well

Comment: Well producing, No sign of cellar/rathole present, Bradenhead, Surface and production casing monitored, No venting/leaks present at time of inspection.

Facility ID: 419634 Type: WELL API Number: 103-11805 Status: PR Insp. Status: PR

Producing Well

Comment: Well producing, No sign of cellar/rathole present, Bradenhead, Surface and production casing monitored, No venting/leaks present at time of inspection.

Facility ID: 419636 Type: WELL API Number: 103-11806 Status: PR Insp. Status: PR

Producing Well

Comment: Well producing, No sign of cellar/rathole present, Bradenhead, Surface and production casing monitored, No venting/leaks present at time of inspection.

Facility ID: 419637 Type: WELL API Number: 103-11807 Status: PR Insp. Status: PR

Producing Well

Comment: Well producing, No sign of cellar/rathole present, Bradenhead, Surface and production casing monitored, No venting/leaks present at time of inspection.

Facility ID: 419640 Type: WELL API Number: 103-11808 Status: PR Insp. Status: PR

Producing Well

Comment: Well producing, No sign of cellar/rathole present, Bradenhead, Surface and production casing monitored, No venting/leaks present at time of inspection.

Environmental**Spills/Releases:**

Type of Spill: Description: Estimated Spill Volume:

Comment:

Corrective Action: Date:

Inspector Name: GRANAHAN, KYLE

Reportable: _____	GPS: Lat _____	Long _____
Proximity to Surface Water: _____	Depth to Ground Water: _____	
Water Well:		
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: RANGELAND	
Comment: _____	
1003a. Waste and Debris removed? <u>Pass</u>	
CM _____	
CA _____	CA Date _____
Unused or unneeded equipment onsite? <u>Pass</u>	
CM _____	
CA _____	CA Date _____
Pit, cellars, rat holes and other bores closed? <u>Pass</u>	
CM _____	
CA _____	CA Date _____
Guy line anchors marked? <u>Pass</u>	
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	
<u>Cropland</u>	
Top soil replaced _____	Recontoured _____ Perennial forage re-established _____
<u>Non-Cropland</u>	
Top soil replaced _____	Recontoured _____ 80% Revegetation _____

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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 _____

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
Gravel	Pass					
Compaction	Pass					
		Compaction	Pass			
		Gravel	Pass			
				MHSP	Pass	
Berms	Pass					

S/A/V: SATISFACTOR

Corrective Date: _____

Y

Comment: Snow cover present - no sediment flow evident.

CA: _____

Pits: ☒ NO SURFACE INDICATION OF PIT