

**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:

02/25/2016

Document Number:

666801958

Overall Inspection:

SATISFACTORY**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	285859	335132	Murray, Richard	<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
, Inspections		COGCCInspectionReports@wpxenergy.com	Field Inspections

Compliance Summary:QtrQtr: NWNW Sec: 23 Twp: 6S Range: 94W

Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Action Required	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
05/18/2011	200311554	PR	PR	SATISFACTORY			No
01/20/2010	200236562	PR	PR	SATISFACTORY			Yes
09/04/2008	200194706	PR	PR	SATISFACTORY			No

Inspector Comment:**Related Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status	
285851	WELL	PR	04/24/2007	GW	045-12575	CLOUGH RWF 522-23	PR	<input checked="" type="checkbox"/>
285852	WELL	PR	09/30/2008	GW	045-12574	CLOUGH RWF 412-23	PR	<input checked="" type="checkbox"/>
285853	WELL	PR	09/30/2008	GW	045-12573	CLOUGH RWF 422-23	PR	<input checked="" type="checkbox"/>
285854	WELL	PR	04/24/2007	GW	045-12572	CLOUGH RWF 11-23	PR	<input checked="" type="checkbox"/>
285855	WELL	PR	08/31/2008	GW	045-12571	CLOUGH RWF 22-23	PR	<input checked="" type="checkbox"/>
285856	WELL	PR	08/31/2008	GW	045-12570	CLOUGH RWF 411-23	PR	<input checked="" type="checkbox"/>
285857	WELL	PR	10/31/2008	GW	045-12569	CLOUGH RWF 312-23	PR	<input checked="" type="checkbox"/>
285858	WELL	PR	04/24/2007	GW	045-12568	CLOUGH RWF 21-23	PR	<input checked="" type="checkbox"/>
285859	WELL	PR	04/24/2007	GW	045-12567	CLOUGH RWF 321-23	PR	<input checked="" type="checkbox"/>

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285860	WELL	PR	04/24/2007	GW	045-12566	CLOUGH RWF 421-23	PR	<input checked="" type="checkbox"/>
285861	WELL	PR	09/30/2008	GW	045-12565	CLOUGH RWF 512-23	PR	<input checked="" type="checkbox"/>
285862	WELL	PR	09/30/2008	GW	045-12564	CLOUGH RWF 12-23	PR	<input checked="" type="checkbox"/>
285863	WELL	PR	06/15/2008	GW	045-12563	CLOUGH RWF 311-23	PR	<input checked="" type="checkbox"/>
294707	WELL	PR	08/12/2008	GW	045-15575	CLOUGH RWF 544-15	PR	<input checked="" type="checkbox"/>
294708	WELL	PR	02/26/2008	GW	045-15576	CLOUGH RWF 156-15	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: _____

LocationLease Road:

Type	Satisfactory/Action Required	comment	Corrective Action	Date

Signs/Marker:

Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
BATTERY	SATISFACTORY	AIRS ID 045-1909-001		

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	# 0	Satisfactory/Action Required:	SATISFACTORY
Comment			
Corrective Action			Date:
Type: Plunger Lift	# 15	Satisfactory/Action Required:	SATISFACTORY
Comment			
Corrective Action			Date:
Type: Horizontal Heated Separator	# 15	Satisfactory/Action Required:	SATISFACTORY
Comment			
Corrective Action			Date:
Type: Gas Meter Run	# 0	Satisfactory/Action Required:	SATISFACTORY
Comment			
Corrective Action			Date:

Facilities:		<input type="checkbox"/> New Tank	Tank ID: _____
Contents	#	Capacity	Type
PRODUCED WATER	1	<100 BBLs	STEEL AST
S/AR	SATISFACTORY	Comment:	Centralized battery
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

Corrective Action		Corrective Date	
Comment			

Facilities:		<input type="checkbox"/> New Tank	Tank ID: _____
Contents	#	Capacity	Type
METHANOL	1	OTHER	OTHER
S/AR	SATISFACTORY	Comment:	At separator
Corrective Action:			Corrective Date:

Paint

Condition	Adequate
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Other (Content) _____

Other (Capacity) 500gal _____

Other (Type) _____

Berms

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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	1	200 BBLS	STEEL AST	,

S/AR	SATISFACTORY	Comment:	Centralized battery
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Corrective Action:		Corrective Date:	
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Paint

Condition	
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Other (Content) _____

Other (Capacity) _____

Other (Type) _____

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance

Corrective Action		Corrective Date	
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Facilities: ☐ New Tank Tank ID: _____

Contents	#	Capacity	Type	SE GPS
CONDENSATE	2	300 BBLS	STEEL AST	39.516460,-107.862850

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

Condition	Adequate
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Other (Content) _____

Other (Capacity) _____

Other (Type) _____

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Earth	Adequate	Walls Sufficient	Base Sufficient	Adequate

Corrective Action		Corrective Date	
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Facilities: ☐ New Tank Tank ID: _____

Contents	#	Capacity	Type	SE GPS
PRODUCED WATER	2	200 BBLS	STEEL AST	,

S/AR	SATISFACTORY	Comment:	Centralized battery
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Corrective Action:		Corrective Date:	
--------------------	--	------------------	--

Paint

Condition	Adequate
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Inspector Name: Murray, Richard

Other (Content) _____
Other (Capacity) _____
Other (Type) _____

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance	
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: 285859

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: 285851 Type: WELL API Number: 045-12575 Status: PR Insp. Status: PR

Producing Well

Comment: Plunger lift

Facility ID: 285852 Type: WELL API Number: 045-12574 Status: PR Insp. Status: PR

Producing Well

Comment: Plunger lift

Facility ID: 285853 Type: WELL API Number: 045-12573 Status: PR Insp. Status: PR

Producing Well

Comment: Plunger lift

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Facility ID:	285854	Type:	WELL	API Number:	045-12572	Status:	PR	Insp. Status:	PR
<div>Producing Well</div> <div>Comment: Plunger lift</div>									
Facility ID:	285855	Type:	WELL	API Number:	045-12571	Status:	PR	Insp. Status:	PR
<div>Producing Well</div> <div>Comment: Plunger lift</div>									
Facility ID:	285856	Type:	WELL	API Number:	045-12570	Status:	PR	Insp. Status:	PR
<div>Producing Well</div> <div>Comment: Plunger lift</div>									
Facility ID:	285857	Type:	WELL	API Number:	045-12569	Status:	PR	Insp. Status:	PR
<div>Producing Well</div> <div>Comment: Plunger lift</div>									
Facility ID:	285858	Type:	WELL	API Number:	045-12568	Status:	PR	Insp. Status:	PR
<div>Producing Well</div> <div>Comment: Plunger lift</div>									
Facility ID:	285859	Type:	WELL	API Number:	045-12567	Status:	PR	Insp. Status:	PR
<div>Producing Well</div> <div>Comment: Plunger lift</div>									
Facility ID:	285860	Type:	WELL	API Number:	045-12566	Status:	PR	Insp. Status:	PR
<div>Producing Well</div> <div>Comment: Plunger lift</div>									
Facility ID:	285861	Type:	WELL	API Number:	045-12565	Status:	PR	Insp. Status:	PR
<div>Producing Well</div> <div>Comment: Plunger lift</div>									
Facility ID:	285862	Type:	WELL	API Number:	045-12564	Status:	PR	Insp. Status:	PR
<div>Producing Well</div> <div>Comment: Plunger lift</div>									
Facility ID:	285863	Type:	WELL	API Number:	045-12563	Status:	PR	Insp. Status:	PR
<div>Producing Well</div> <div>Comment: Plunger lift</div>									
Facility ID:	294707	Type:	WELL	API Number:	045-15575	Status:	PR	Insp. Status:	PR
<div>Producing Well</div> <div>Comment: Plunger lift</div>									
Facility ID:	294708	Type:	WELL	API Number:	045-15576	Status:	PR	Insp. Status:	PR

Producing WellComment: **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): N

Comment: _____

Pilot: _____ 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 _____

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? _____

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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
		Ditches	Pass			
Ditches	Pass					
		Culverts	Pass			
Slope Roughening	Pass					
		Gravel	Pass			
Seeding	Pass					

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

Y

Comment: _____

CA: _____

Pits: ☒ NO SURFACE INDICATION OF PIT