

**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:  
03/08/2016  
Document Number:  
674900962

**FIELD INSPECTION FORM**

|                     |              |               |                    |                          |             |
|---------------------|--------------|---------------|--------------------|--------------------------|-------------|
| Location Identifier | Facility ID  | Loc ID        | Inspector Name:    | On-Site Inspection       | 2A Doc Num: |
|                     | <u>89124</u> | <u>326511</u> | <u>Hughes, Jim</u> | <input type="checkbox"/> |             |

Overall Inspection:  
SATISFACTORY w/ CMT or AR

**Operator Information:**

|                       |   |
|-----------------------|---|
| OGCC Operator Number: | <u>100264</u>                                   |
| Name of Operator:     | <u>XTO ENERGY INC</u>                           |
| Address:              | <u>382 CR 3100</u>                              |
| City:                 | <u>AZTEC</u> State: <u>NM</u> Zip: <u>87410</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         |
|------------------|--------------|-------------------------------|-----------------|
| Hixon, Logan     | 505-386-8018 | logan_hixon@xtoenergy.com     | EH&S Technician |
| Harrison, Lyndon |              | lyndon_harrison@xtoenergy.com |                 |
| Trobaugh, Robert | 505-333-3185 | robert_trobaugh@xtoenergy.com | All Inspections |
| Fischer, Alex    |              | alex.fischer@state.co.us      |                 |

**Compliance Summary:**

QtrQtr: SESW Sec: 3 Twp: 34N Range: 8W

| Insp. Date | Doc Num   | Insp. Type | Insp Status | Satisfactory /Action Required | PA P/F/I | Pas/Fail (P/F) | Violation (Y/N) |
|------------|-----------|------------|-------------|-------------------------------|----------|----------------|-----------------|
| 10/07/2015 | 680600213 | SI         | SI          | SATISFACTORY                  | I        |                | No              |
| 09/30/2014 | 669500427 | PR         | PR          | SATISFACTORY                  |          |                | No              |
| 06/05/2014 | 674600487 | PR         | SI          | SATISFACTORY                  |          |                | No              |
| 05/19/2014 | 674600395 | PR         | SI          | SATISFACTORY                  | P        |                | No              |
| 03/29/2013 | 669400541 | PR         | PR          | SATISFACTORY                  | I        |                | No              |
| 08/05/2010 | 200265756 | PR         | PR          | SATISFACTORY                  |          |                | No              |
| 12/09/2008 | 200199855 | PR         | PR          | SATISFACTORY                  |          |                | No              |
| 08/15/2006 | 200099638 | PR         | PR          | SATISFACTORY                  |          | Pass           | No              |
| 06/24/2004 | 200058089 | PR         | PR          | SATISFACTORY                  |          | Pass           | No              |
| 09/03/2002 | 200032132 | PR         | PR          | SATISFACTORY                  |          | Pass           | No              |
| 08/08/2002 | 200030923 | PR         | PR          | SATISFACTORY                  |          | Pass           | No              |

**Inspector Comment:**

On March 8, 2016 COGCC SW EPS Jim Hughes conducted an environmental field inspection of the XTO Huber-Burkett #4-3. This field inspection resulted from Spill/Release Report #401000435. Logan Hixon, XTO representative, was on site during this inspection. For the most recent field inspection report of this facility, please refer to document #680600213.

**Related Facilities:**

Inspector Name: Hughes, Jim

| Facility ID | Type             | Status | Status Date | Well Class | API Num   | Facility Name       | Insp Status |                                     |
|-------------|------------------|--------|-------------|------------|-----------|---------------------|-------------|-------------------------------------|
| 89124       | WELL             | SI     | 10/01/2014  | GW         | 067-08228 | HUBER-BURKETT 4-3   | EI          | <input checked="" type="checkbox"/> |
| 445071      | SPILL OR RELEASE | AC     | 03/07/2016  |            | -         | SPILL/RELEASE POINT | EI          | <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 |
|----------|------------------------------|------------------------------|-------------------|---------|
| WELLHEAD | SATISFACTORY                 | Location sign near entrance. |                   |         |

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    |
|----------------|-----------|-----------|--|------------|
| Produced Water | Separator | >= 5 bbls | Provide analytical results upon receipt. | 04/14/2016 |

Multiple Spills and Releases?

**Fencing/:**

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

**Equipment:**

|                          |                    |                               |              |
|--------------------------|--------------------|-------------------------------|--------------|
| Type: Deadman # & Marked | # 4                | Satisfactory/Action Required: | SATISFACTORY |
| Comment                  | NE marker is down. |                               |              |
| Corrective Action        |                    | Date:                         |              |
| Type: Bird Protectors    | # 2                | Satisfactory/Action Required: | SATISFACTORY |

|                                 |     |                               |              |
|---------------------------------|-----|-------------------------------|--------------|
| Comment                         |     |                               |              |
| Corrective Action               |     |                               | Date:        |
| Type: Vertical Heated Separator | # 2 | 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: 89124

**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: 89124 Type: WELL API Number: 067-08228 Status: SI Insp. Status: EI

Facility ID: 445071 Type: SPILL OR API Number: - Status: AC Insp. Status: EI

**Environmental**

**Spills/Releases:**

Type of Spill: WATER Description: Produced water Estimated Spill Volume: 70

Comment: Please refer to document #401000435 for a detailed description of release in separator shack.

Corrective Action: Submit analytical results to SW EPS upon receipt. Date: 04/14/2016

Reportable: YES GPS: Lat 37.239302 Long -107.736841

Proximity to Surface Water: \_\_\_\_\_ Depth to Ground Water: \_\_\_\_\_

|                        |                   |             |       |
|------------------------|-------------------|-------------|-------|
| <b>Water Well:</b>     |                   | Lat         | Long  |
| 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: \_\_\_\_\_

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: \_\_\_\_\_

Inspector Name: Hughes, Jim

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 |
|------------------|-----------------|-------------------------|-----------------------|---------------|--------------------------|---------|
| Berms            | Pass            | Culverts                | Pass                  |               |                          |         |
| Rip Rap          | Pass            | Compaction              | Pass                  | SR            | Pass                     |         |

S/A/V: SATISFACTOR Y Corrective Date: \_\_\_\_\_

Comment: \_\_\_\_\_

CA: \_\_\_\_\_

**Pits:**  NO SURFACE INDICATION OF PIT

**COGCC Comments**

| Comment  | User    | Date       |
|--|---------|------------|
| On March 8, 2016 COGCC SW EPS Jim Hughes conducted an environmental field inspection of the XTO Huber-Burkett #4-3. This field inspection resulted from Spill/Release Report #401000435. Logan Hixon, XTO representative, was on site during this inspection. For the most recent field inspection report of this facility, please refer to document #680600213. | hughesj | 03/14/2016 |

**Attached Documents**

You can go to COGCC Images (<https://cogcc.state.co.us/weblink/>) and search by document number:

| Document Num | Description                           | URL   |
|--------------|---------------------------------------|---|
| 674900963    | Release point within separator shack. | <a href="http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3809687">http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3809687</a> |
| 674900964    | Flow path from separator shack.       | <a href="http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3809688">http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3809688</a> |
| 674900965    | Location photo.                       | <a href="http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3809689">http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3809689</a> |