

**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

Overall Inspection:

SATISFACTORY w/ CMT
or AR**FIELD INSPECTION FORM**

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

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
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 Motors: _____	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

Inspector Name: Hughes, Jim

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: _____

Inspector Name: Hughes, Jim

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:

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 _____ Corrective Date: _____

Y

Comment: _____

CA: _____

Pits: ☒ NO SURFACE INDICATION OF PIT

COGCC Comments

Comment	User	Date
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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.	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3809687
674900964	Flow path from separator shack.	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3809688
674900965	Location photo.	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3809689