

**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:

03/21/2016

Document Number:

674702521

Overall Inspection:

SATISFACTORY**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	335905	335905	LONGWORTH, MIKE	<input type="checkbox"/>	

Operator Information:OGCC Operator Number: 100185Name of Operator: ENCANA OIL & GAS (USA) INCAddress: 370 17TH ST STE 1700City: DENVER State: CO Zip: 80202-

- ☐ 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, General	970-285-2665	cogcc.inspections@encana.com	EnCana Inspection email

Compliance Summary:QtrQtr: NENW Sec: 19 Twp: 5S Range: 95W

Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Action Required	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
08/07/2015	674701700			SATISFACTORY			No
01/02/2014	663902590			SATISFACTORY	F		No

Inspector Comment:**Related Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status	
285534	WELL	PR	10/26/2007	GW	045-12514	N. PARACHUTE EF03B19 D19A595	PR	<input checked="" type="checkbox"/>
286632	WELL	PR	01/27/2014	GW	045-12712	N. PARACHUTE EF04A D19A595	PR	<input checked="" type="checkbox"/>
286633	WELL	PR	09/07/2006	GW	045-12711	N. PARACHUTE EF08B D19A 595	PR	<input checked="" type="checkbox"/>
286634	WELL	PR	09/07/2006	GW	045-12710	N.PARACHUTE EF01B D19A 595	PR	<input checked="" type="checkbox"/>
286635	WELL	PR	09/07/2006	GW	045-12709	N. PARACHUTE EF01D D19A 595	PR	<input checked="" type="checkbox"/>
286636	WELL	PR	09/07/2006	GW	045-12708	N. PARACHUTE EF02D D19A 595	PR	<input checked="" type="checkbox"/>
286637	WELL	PR	09/07/2006	GW	045-12707	N.PARACHUTE EF02B D19A 595	PR	<input checked="" type="checkbox"/>
286638	WELL	PR	09/07/2006	GW	045-12706	N. PARACHUTE EF03C D19A 595	PR	<input checked="" type="checkbox"/>
286639	WELL	PR	02/01/2011	GW	045-12705	N. PARACHUTE EF03D D19A 595	PR	<input checked="" type="checkbox"/>

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286640	WELL	PR	09/11/2006	GW	045-12704	N. PARACHUTE EF07B D19A 595	PR	<input checked="" type="checkbox"/>
286641	WELL	PR	09/11/2006	GW	045-12703	N. PARACHUTE EF01D- 24 D19A 5	PR	<input checked="" type="checkbox"/>
286721	WELL	PR	09/14/2006	GW	045-12772	N. PARACHUTE EF03B D19A 595	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: _____

Location**Lease Road:**

Type	Satisfactory/Action Required	comment	Corrective Action	Date

Signs/Marker:

Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
CONTAINERS	SATISFACTORY			
TANK LABELS/PLACARDS	SATISFACTORY			
BATTERY	SATISFACTORY			
WELLHEAD	SATISFACTORY			

Emergency Contact Number (S/AR): SATISFACTORY

Corrective Date: _____

Comment: **800-791-7691**

Corrective Action: _____

Good Housekeeping:

Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
TRASH	SATISFACTORY			

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: Gas Meter Run	# 12	Satisfactory/Action Required: SATISFACTORY
Comment	Gas lift	

Inspector Name: LONGWORTH, MIKE

Corrective Action		Date:	
Type: Ancillary equipment	# 3	Satisfactory/Action Required:	SATISFACTORY
Comment		Chemical containers	
Corrective Action		Date:	
Type: Plunger Lift	# 12	Satisfactory/Action Required:	SATISFACTORY
Comment			
Corrective Action		Date:	
Type: Gas Meter Run	# 12	Satisfactory/Action Required:	SATISFACTORY
Comment			
Corrective Action		Date:	

Facilities: ☐ New Tank Tank ID: _____

Contents	#	Capacity	Type	SE GPS
CONDENSATE	1	<100 BBLS	STEEL AST	,

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

Paint

Condition	Adequate
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Other (Content) _____

Other (Capacity) 80 bbl

Other (Type) _____

Berms

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

Corrective Action		Corrective Date	
Comment			

Venting:

Yes/No	NO
Comment	

Flaring:

Type		Satisfactory/Action Required	
Comment:			
Corrective Action:		Correct Action Date:	

Predrill

Location ID: 335905

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: 285534 Type: WELL API Number: 045-12514 Status: PR Insp. Status: PR

Producing Well

Comment: Producing well

Facility ID: 286632 Type: WELL API Number: 045-12712 Status: PR Insp. Status: PR

Producing Well

Comment: Producing well

Facility ID: 286633 Type: WELL API Number: 045-12711 Status: PR Insp. Status: PR

Producing Well

Comment: Producing well

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Facility ID: 286634 Type: WELL API Number: 045-12710 Status: PR Insp. Status: PR

Producing Well

Comment: Producing well

Facility ID: 286635 Type: WELL API Number: 045-12709 Status: PR Insp. Status: PR

Producing Well

Comment: Producing well

Facility ID: 286636 Type: WELL API Number: 045-12708 Status: PR Insp. Status: PR

Producing Well

Comment: Producing well

Facility ID: 286637 Type: WELL API Number: 045-12707 Status: PR Insp. Status: PR

Producing Well

Comment: Producing well

Facility ID: 286638 Type: WELL API Number: 045-12706 Status: PR Insp. Status: PR

Producing Well

Comment: Producing well

Facility ID: 286639 Type: WELL API Number: 045-12705 Status: PR Insp. Status: PR

Producing Well

Comment: Producing well

Facility ID: 286640 Type: WELL API Number: 045-12704 Status: PR Insp. Status: PR

Producing Well

Comment: Producing well

Facility ID: 286641 Type: WELL API Number: 045-12703 Status: PR Insp. Status: PR

Producing Well

Comment: Producing well

Facility ID: 286721 Type: WELL API Number: 045-12772 Status: PR Insp. Status: PR

Producing Well

Comment: Producing well

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): _____

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? 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? _____

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:

Inspector Name: LONGWORTH, MIKE

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
		Culverts	Pass			
Compaction	Pass					
		Ditches	Pass			
Check Dams	Pass					
Berms	Pass					
				MHSP	Pass	
		Compaction	Pass			
Gravel	Pass					

S/A/V: SATISFACTOR
Y

Corrective Date: _____

Comment: _____

CA: _____

Pits: ☒ NO SURFACE INDICATION OF PIT