

**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:

03/23/2016

Document Number:

666802021

Overall Inspection:

SATISFACTORY**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	293633	335004	Murray, Richard	<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
Contact, General		cogcc.inspections@encana.com	

Compliance Summary:QtrQtr: NWNW Sec: 11 Twp: 7S Range: 94W**Inspector Comment:****Related Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status	
293631	WELL	PR	05/17/2012	GW	045-15064	FEDERAL SAVAGE 11-11B (RD-11)	PR	<input checked="" type="checkbox"/>
293633	WELL	PR	03/26/2012	GW	045-15065	FEDERAL SAVAGE 11-5C (RD-11)	PR	<input checked="" type="checkbox"/>
293634	WELL	PR	05/17/2012	GW	045-15067	FEDERAL 10-1D (RD-11)	PR	<input checked="" type="checkbox"/>
293636	WELL	PR	05/17/2012	GW	045-15066	FEDERAL 2-13C (RD-11)	PR	<input checked="" type="checkbox"/>
293637	WELL	PR	05/17/2012	GW	045-15068	FEDERAL SAVAGE 11-6C (RD-11)	PR	<input checked="" type="checkbox"/>
293639	WELL	PR	05/17/2012	GW	045-15069	FEDERAL SAVAGE 11-5 (RD-11)	PR	<input checked="" type="checkbox"/>
420604	WELL	PR	05/17/2012	GW	045-20185	FEDERAL SAVAGE 11-3C (RD-11)	PR	<input checked="" type="checkbox"/>
420606	WELL	PR	09/25/2012	GW	045-20186	FEDERAL SAVAGE 11-3B (RD-11)	PR	<input checked="" type="checkbox"/>
420607	WELL	PR	03/25/2012	GW	045-20187	FEDERAL 11-7C (RD-11)	PR	<input checked="" type="checkbox"/>
420608	WELL	PR	05/17/2012	GW	045-20188	FEDERAL SAVAGE 11-3A (RD-11)	PR	<input checked="" type="checkbox"/>
424388	WELL	PR	05/17/2012	GW	045-20907	Federal Savage 11-6B (RD-11)	PR	<input checked="" type="checkbox"/>

Equipment:**Location Inventory**

Inspector Name: Murray, Richard

Special Purpose Pits: <u>1</u>	Drilling Pits: <u> </u>	Wells: <u>11</u>	Production Pits: <u> </u>
Condensate Tanks: <u>5</u>	Water Tanks: <u> </u>	Separators: <u>11</u>	Electric Motors: <u> </u>
Gas or Diesel Mortors: <u> </u>	Cavity Pumps: <u> </u>	LACT Unit: <u> </u>	Pump Jacks: <u> </u>
Electric Generators: <u> </u>	Gas Pipeline: <u>1</u>	Oil Pipeline: <u> </u>	Water Pipeline: <u>1</u>
Gas Compressors: <u> </u>	VOC Combustor: <u> </u>	Oil Tanks: <u> </u>	Dehydrator Units: <u> </u>
Multi-Well Pits: <u> </u>	Pigging Station: <u> </u>	Flare: <u> </u>	Fuel Tanks: <u> </u>

Location

Lease Road:

Type	Satisfactory/Action Required	comment	Corrective Action	Date

Signs/Marker:

Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
BATTERY	SATISFACTORY	AIR ID 045-2268-001		

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	# 1	Satisfactory/Action Required:	SATISFACTORY
Comment			
Corrective Action			Date:
Type: Gas Meter Run	# 1	Satisfactory/Action Required:	SATISFACTORY
Comment			
Corrective Action			Date:
Type: Pig Station	# 1	Satisfactory/Action Required:	SATISFACTORY
Comment			
Corrective Action			Date:
Type: Plunger Lift	# 11	Satisfactory/Action Required:	SATISFACTORY

Inspector Name: Murray, Richard

Comment			
Corrective Action		Date:	
Type: Vertical Heated Separator	# 11	Satisfactory/Action Required:	SATISFACTORY
Comment			
Corrective Action		Date:	

Facilities: ☐ New Tank Tank ID: _____

Contents	#	Capacity	Type	SE GPS
CONDENSATE	6	500 BBLS	STEEL AST	39.457683,-107.858788

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	

Venting:

Yes/No	NO
Comment	

Flaring:

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

Predrill

Location ID: 293633

Site Preparation:

Lease Road Adeq.: _____ Pads: _____ Soil Stockpile: _____

S/AR: _____

Corrective Action: _____ Date: _____ CDP Num.: _____

Form 2A COAs:

Group	User	Comment	Date
OGLA	kubeczkod	If fluids are conveyed via pipeline, operator must implement best management practices to contain any unintentional release of fluids.	10/19/2010

Inspector Name: Murray, Richard

OGLA	kubeczkod	Location is in a sensitive area because of close proximity to surface water, therefore, 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 (i.e., BMPs associated with stormwater management) sufficiently protective of the nearby surface water.	10/19/2010
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.	10/19/2010
OGLA	kubeczkod	Operator must implement best management practices to contain any unintentional release of fluids.	10/19/2010
OGLA	kubeczkod	Either a lined drilling pit or a closed loop system (which operator has already indicated on the Form 2A) must be implemented.	10/19/2010

S/AR: SATISFACTORY

Comment:

No drilling or completions being performed at time of inspection, No visual sign of pits or cuttings

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: 293631 Type: WELL API Number: 045-15064 Status: PR Insp. Status: PR

Producing WellComment: **Plunger lift**Facility ID: 293633 Type: WELL API Number: 045-15065 Status: PR Insp. Status: PR**Producing Well**Comment: **Plunger lift**Facility ID: 293634 Type: WELL API Number: 045-15067 Status: PR Insp. Status: PR**Producing Well**Comment: **Plunger lift**Facility ID: 293636 Type: WELL API Number: 045-15066 Status: PR Insp. Status: PR**Producing Well**Comment: **Plunger lift**Facility ID: 293637 Type: WELL API Number: 045-15068 Status: PR Insp. Status: PR**Producing Well**Comment: **Plunger lift**Facility ID: 293639 Type: WELL API Number: 045-15069 Status: PR Insp. Status: PR**Producing Well**Comment: **Plunger lift**Facility ID: 420604 Type: WELL API Number: 045-20185 Status: PR Insp. Status: PR**Producing Well**Comment: **Plunger lift**Facility ID: 420606 Type: WELL API Number: 045-20186 Status: PR Insp. Status: PR**Producing Well**Comment: **Plunger lift**Facility ID: 420607 Type: WELL API Number: 045-20187 Status: PR Insp. Status: PR**Producing Well**Comment: **Plunger lift**Facility ID: 420608 Type: WELL API Number: 045-20188 Status: PR Insp. Status: PR**Producing Well**Comment: **Plunger lift**Facility ID: 424388 Type: WELL API Number: 045-20907 Status: PR Insp. Status: PR**Producing Well**Comment: **Plunger lift****Environmental****Spills/Releases:**

Type of Spill: _____

Description: _____

Estimated Spill Volume: _____

Inspector Name: Murray, Richard

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): Y _____

Comment: _____

Pilot: ON _____ Wildlife Protection Devices (fired vessels): YES _____

Reclamation - Storm Water - Pit

Interim Reclamation:

Date Interim Reclamation Started: _____ Date Interim Reclamation Completed: _____

Land Use: RANGELAND

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 _____

Inspector Name: Murray, Richard

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: 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
Slope Roughening	Pass					
		Ditches	Pass			
Waddles	Pass					
Retention Ponds	Pass					
		Culverts	Pass			
		Gravel	Pass			
Gravel	Pass					

S/A/V: SATISFACTOR
Y

Corrective Date: _____

Comment: **Snow covered location**

CA: _____

Pits: ☒ NO SURFACE INDICATION OF PIT