

**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:

04/14/2016

Document Number:

675202711

Overall Inspection:

SATISFACTORY**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	335032	335032	CONKLIN, CURTIS	<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
WPX, Energy		COGCCInspectionReports@wpxenergy.com	All Inspections

Compliance Summary:QtrQtr: NWNW Sec: 1 Twp: 7S Range: 95W

Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Action Required	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
02/04/2015	675201152			ACTION REQUIRED			No

Inspector Comment:**Related Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status	
295119	WELL	PR	01/31/2009	GW	045-15654	FEDERAL PA 11-1	PR	<input checked="" type="checkbox"/>
295120	WELL	PR	01/18/2009	GW	045-15655	FEDERAL PA 412-1	PR	<input checked="" type="checkbox"/>
295121	WELL	PR	01/18/2009	GW	045-15656	FEDERAL PA 312-1	PR	<input checked="" type="checkbox"/>
295122	WELL	PR	01/18/2009	GW	045-15657	FEDERAL PA 22-1	PR	<input checked="" type="checkbox"/>
295123	WELL	PR	01/18/2009	GW	045-15658	FEDERAL PA 322-1	PR	<input checked="" type="checkbox"/>
295124	WELL	PR	01/18/2009	GW	045-15659	FEDERAL PA 422-1	PR	<input checked="" type="checkbox"/>
295125	WELL	PR	01/31/2009	GW	045-15660	FEDERAL PA 411-1	PR	<input checked="" type="checkbox"/>
295126	WELL	PR	06/30/2009	GW	045-15661	FEDERAL PA 311-1	PR	<input checked="" type="checkbox"/>
295127	WELL	PR	01/18/2009	GW	045-15662	FEDERAL PA 321-1	PR	<input checked="" type="checkbox"/>
295128	WELL	PR	01/31/2009	GW	045-15663	FEDERAL PA 21-1	PR	<input checked="" type="checkbox"/>

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295129	WELL	PR	01/18/2009	GW	045-15664	FEDERAL PA 421-1	PR	<input checked="" type="checkbox"/>
295130	WELL	PR	01/18/2009	GW	045-15665	FEDERAL PA 511-1	PR	<input checked="" type="checkbox"/>
295131	WELL	PR	01/18/2009	GW	045-15666	FEDERAL PA 12-1	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
Access	SATISFACTORY			

Signs/Marker:

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

Emergency Contact Number (S/AR): SATISFACTORY

Corrective Date: _____

Comment: 970-285-9377

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
WELLHEAD	SATISFACTORY			
TANK BATTERY	SATISFACTORY			
SEPARATOR	SATISFACTORY			

Equipment:

Type:	#	Satisfactory/Action Required:
Comment		

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

Contents	#	Capacity	Type	SE GPS
PRODUCED WATER	1	200 BBLS	STEEL AST	,

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

Condition	Inadequate
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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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Comment

Facilities: ☐ New Tank Tank ID: _____

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

S/AR	SATISFACTORY	Comment: AIRS ID 045-2221-001
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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
Metal	Adequate	Walls Sufficient	Base Sufficient	Adequate

Corrective Action	Corrective Date
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Comment

Venting:

Yes/No	NO
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Comment

Flaring:

Type	Satisfactory/Action Required
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Comment: _____

Corrective Action:	Correct Action Date:
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Predrill

Location ID: 335032

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: 295119 Type: WELL API Number: 045-15654 Status: PR Insp. Status: PR

Facility ID: 295120 Type: WELL API Number: 045-15655 Status: PR Insp. Status: PR

Facility ID: 295121 Type: WELL API Number: 045-15656 Status: PR Insp. Status: PR

Facility ID: 295122 Type: WELL API Number: 045-15657 Status: PR Insp. Status: PR

Facility ID: 295123 Type: WELL API Number: 045-15658 Status: PR Insp. Status: PR

Facility ID: 295124 Type: WELL API Number: 045-15659 Status: PR Insp. Status: PR

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Facility ID:	295125	Type:	WELL	API Number:	045-15660	Status:	PR	Insp. Status:	PR
Facility ID:	295126	Type:	WELL	API Number:	045-15661	Status:	PR	Insp. Status:	PR
Facility ID:	295127	Type:	WELL	API Number:	045-15662	Status:	PR	Insp. Status:	PR
Facility ID:	295128	Type:	WELL	API Number:	045-15663	Status:	PR	Insp. Status:	PR
Facility ID:	295129	Type:	WELL	API Number:	045-15664	Status:	PR	Insp. Status:	PR
Facility ID:	295130	Type:	WELL	API Number:	045-15665	Status:	PR	Insp. Status:	PR
Facility ID:	295131	Type:	WELL	API Number:	045-15666	Status:	PR	Insp. Status:	PR

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? _____

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 REVEGETATIONCropland

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
Gravel	Pass	Compaction	Pass			

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Berms	Pass	Culverts	Pass			
Ditches	Pass	Gravel	Pass			

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

Comment: Location is rutted, but no standing water at time of inspection.

CA: _____

Pits: ☒ NO SURFACE INDICATION OF PIT