

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:
05/24/2016
Document Number:
666802190
Overall Inspection:
SATISFACTORY

FIELD INSPECTION FORM

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	<u>298949</u>	<u>335503</u>	<u>Murray, Richard</u>	<input type="checkbox"/>	

Operator Information:

OGCC Operator Number:	<u>96850</u>
Name of Operator:	<u>WPX ENERGY ROCKY MOUNTAIN LLC</u>
Address:	<u>PO BOX 370</u>
City:	<u>PARACHUTE</u> State: <u>CO</u> Zip: <u>81635</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
, Inspections		COGCCInspectionReports@wpxenergy.com	Field Inspections

Compliance Summary:

QtrQtr: NESW Sec: 30 Twp: 6S Range: 94W

Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Action Required	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
09/27/2011	200323240	PR	PR	SATISFACTORY			No
03/01/2011	200300929	SR	PR	SATISFACTORY			No

Inspector Comment:

Related Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status	
298949	WELL	PR	09/30/2009	GW	045-17487	BUXTON RWF 313-30	PR	<input checked="" type="checkbox"/>
298950	WELL	PR	12/11/2009	GW	045-17488	BUXTON RWF 13-30	PR	<input checked="" type="checkbox"/>
298951	WELL	PR	09/30/2009	GW	045-17489	BUXTON RWF 413-30	PR	<input checked="" type="checkbox"/>
298952	WELL	PR	01/11/2010	GW	045-17490	BUXTON RWF 513-30	PR	<input checked="" type="checkbox"/>
298953	WELL	PR	01/11/2010	GW	045-17491	BUXTON RWF 14-30	PR	<input checked="" type="checkbox"/>
298954	WELL	PR	08/11/2009	GW	045-17492	BUXTON RWF 314-30	PR	<input checked="" type="checkbox"/>
298955	WELL	PR	03/29/2010	GW	045-17493	BUXTON RWF 514-30	PR	<input checked="" type="checkbox"/>
298956	WELL	PR	10/14/2008	GW	045-17494	BUXTON RWF 323-30	PR	<input checked="" type="checkbox"/>
298957	WELL	PR	01/11/2010	GW	045-17495	BUXTON RWF 423-30	PR	<input checked="" type="checkbox"/>

298958	WELL	PR	08/30/2009	GW	045-17496	BUXTON RWF 523-30	PR	✗
298959	WELL	PR	08/31/2009	GW	045-17497	BUXTON RWF 24-30	PR	✗
298960	WELL	PR	06/16/2009	GW	045-17498	BUXTON RWF 324-30	PR	✗
298961	WELL	PR	06/16/2009	GW	045-17499	BUXTON RWF 424-30	PR	✗
298962	WELL	PR	03/29/2010	GW	045-17500	BUXTON RWF 333-30	PR	✗
298963	WELL	PR	09/30/2009	GW	045-17501	BUXTON RWF 33-30	PR	✗
298964	WELL	PR	01/11/2010	GW	045-17502	BUXTON RWF 432-30	PR	✗
299068	WELL	PR	01/11/2010	GW	045-17548	BUXTON RWF 23-30	PR	✗
299069	WELL	PR	06/30/2009	GW	045-17549	BUXTON RWF 524-30	PR	✗
299070	WELL	PR	04/06/2012	GW	045-17550	BUXTON RWF 522-30	PR	✗

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
BATTERY	SATISFACTORY	AIRS ID 045-1937-001		

Emergency Contact Number (S/AR): SATISFACTORY

Corrective Date: _____

Comment: _____

Corrective Action: _____

Good Housekeeping:

Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
UNUSED EQUIPMENT	SATISFACTORY	Emissions control device		

Spills:

Type	Area	Volume	Corrective action	CA Date

Multiple Spills and Releases?

Fencing/:

Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date

Equipment:

Type: Horizontal Heated Separator	# 19	Satisfactory/Action Required:	SATISFACTORY	
Comment				
Corrective Action				Date:
Type: Plunger Lift	# 19	Satisfactory/Action Required:	SATISFACTORY	
Comment				
Corrective Action				Date:
Type: Ancillary equipment	# 4	Satisfactory/Action Required:	SATISFACTORY	
Comment	Chemical unit at wellhead			
Corrective Action				Date:

Facilities:

New Tank Tank ID: _____

Contents	#	Capacity	Type	SE GPS
METHANOL	1	1000 GAL	STEEL AST	,
S/AR	SATISFACTORY		Comment:	Centralized battery
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
Corrective Action				Corrective Date
Comment				

Facilities:

New Tank Tank ID: _____

Contents	#	Capacity	Type	SE GPS
PRODUCED WATER	2	300 BBLS	STEEL AST	,
S/AR	SATISFACTORY		Comment:	Centralized battery
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
Corrective Action				Corrective Date
Comment				

Facilities: New Tank Tank ID: _____

Contents	#	Capacity	Type	SE GPS
CONDENSATE	4	300 BBLS	STEEL AST	39.534810,-107.790390
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	YES
Comment	Bradenhead valves open

Flaring:

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

Predrill

Location ID: 298949
 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: 298949 Type: WELL API Number: 045-17487 Status: PR Insp. Status: PR

Producing Well

Comment: **Plunger lift**

Facility ID: 298950 Type: WELL API Number: 045-17488 Status: PR Insp. Status: PR

Producing Well

Comment: **Plunger lift**

Facility ID: 298951 Type: WELL API Number: 045-17489 Status: PR Insp. Status: PR

Producing Well

Comment: **Plunger lift**

Facility ID: 298952 Type: WELL API Number: 045-17490 Status: PR Insp. Status: PR

Producing Well									
Comment: Plunger lift									
Facility ID:	298953	Type:	WELL	API Number:	045-17491	Status:	PR	Insp. Status:	PR
Producing Well									
Comment: Plunger lift									
Facility ID:	298954	Type:	WELL	API Number:	045-17492	Status:	PR	Insp. Status:	PR
Producing Well									
Comment: Plunger lift									
Facility ID:	298955	Type:	WELL	API Number:	045-17493	Status:	PR	Insp. Status:	PR
Producing Well									
Comment: Plunger lift									
Facility ID:	298956	Type:	WELL	API Number:	045-17494	Status:	PR	Insp. Status:	PR
Producing Well									
Comment: Plunger lift									
Facility ID:	298957	Type:	WELL	API Number:	045-17495	Status:	PR	Insp. Status:	PR
Producing Well									
Comment: Plunger lift									
Facility ID:	298958	Type:	WELL	API Number:	045-17496	Status:	PR	Insp. Status:	PR
Producing Well									
Comment: Plunger lift									
Facility ID:	298959	Type:	WELL	API Number:	045-17497	Status:	PR	Insp. Status:	PR
Producing Well									
Comment: Plunger lift									
Facility ID:	298960	Type:	WELL	API Number:	045-17498	Status:	PR	Insp. Status:	PR
Producing Well									
Comment: Plunger lift									
Facility ID:	298961	Type:	WELL	API Number:	045-17499	Status:	PR	Insp. Status:	PR
Producing Well									
Comment: Plunger lift									
Facility ID:	298962	Type:	WELL	API Number:	045-17500	Status:	PR	Insp. Status:	PR
Producing Well									
Comment: Plunger lift									
Facility ID:	298963	Type:	WELL	API Number:	045-17501	Status:	PR	Insp. Status:	PR
Producing Well									
Comment: Plunger lift									

Facility ID: 298964 Type: WELL API Number: 045-17502 Status: PR Insp. Status: PR

Producing Well

Comment: Plunger lift

Facility ID: 299068 Type: WELL API Number: 045-17548 Status: PR Insp. Status: PR

Producing Well

Comment: Plunger lift

Facility ID: 299069 Type: WELL API Number: 045-17549 Status: PR Insp. Status: PR

Producing Well

Comment: Plunger lift

Facility ID: 299070 Type: WELL API Number: 045-17550 Status: PR Insp. Status: PR

Producing Well

Comment: Plunger lift

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:

DWR Receipt Num: _____ Owner Name: _____ GPS : _____ Lat _____ Long _____

Field Parameters:

Sample Location: _____

Emission Control Burner (ECB): Y

Comment: Disconnected

Pilot: OFF Wildlife Protection Devices (fired vessels): YES

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:

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

Inspector Name: Murray, Richard

Storm Water:						
Loc Erosion BMPs	BMP Maintenance	Lease Road Erosion BMPs	Lease BMP Maintenance	Chemical BMPs	Chemical BMP Maintenance	Comment
Seeding	Pass					
Berms	Pass					
Slope Roughening	Pass					
		Berms	Pass			
		Culverts	Pass			
		Ditches	Pass			

S/A/V: SATISFACTOR
Y

Corrective Date: _____

Comment: _____

CA: _____

Pits: NO SURFACE INDICATION OF PIT