

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:
08/01/2016
Document Number:
666802426
Overall Inspection:
SATISFACTORY

FIELD INSPECTION FORM

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	<u>280630</u>	<u>334618</u>	<u>Murray, Richard</u>	<input type="checkbox"/>	

Operator Information:

OGCC Operator Number:	<u>100185</u>
Name of Operator:	<u>ENCANA OIL & GAS (USA) INC</u>
Address:	<u>370 17TH ST STE 1700</u>
City:	<u>DENVER</u> State: <u>CO</u> Zip: <u>80202-</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
Freeman, Sarah		sarah.freeman@state.co.us	
Contact, General		cogcc.inspections@encana.com	

Compliance Summary:

QtrQtr:	<u>NWNW</u>	Sec:	<u>25</u>	Twp:	<u>7S</u>	Range:	<u>93W</u>
Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Action Required	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
06/16/2011	200312925	PR	PR	SATISFACTORY			No

Inspector Comment:

Wells with the status of XX, Drilling permits expired 12/2014 and 3/2015

Related Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status	
280630	WELL	PR	07/29/2008	GW	045-11302	MCU 26-8C (D25W)	PR	<input checked="" type="checkbox"/>
280631	WELL	PR	09/20/2006	GW	045-11301	HMU 26-1C (D25W)	PR	<input checked="" type="checkbox"/>
291924	WELL	AL	06/21/2011	LO	045-14547	HMU 25-4D(D25W)	AL	<input type="checkbox"/>
291925	WELL	PR	07/26/2008	GW	045-14546	HMU 25-3D(D25W)	PR	<input checked="" type="checkbox"/>
294383	WELL	AL	06/21/2011	LO	045-15412	HMU 25-6A (D25W)	AL	<input type="checkbox"/>
420624	WELL	XX	11/21/2012	LO	045-20189	HMU Federal 24-13D (D25W)	XX	<input checked="" type="checkbox"/>
420626	WELL	XX	11/21/2012	LO	045-20190	HMU Federal 24-13A (D25W)	XX	<input checked="" type="checkbox"/>
420627	WELL	XX	11/21/2012	LO	045-20191	HMU Federal 24-13AA (D25W)	XX	<input checked="" type="checkbox"/>
420628	WELL	XX	11/21/2012	LO	045-20192	HMU Federal 25-4A (D25W)	XX	<input checked="" type="checkbox"/>

420629	WELL	AL	06/24/2016	LO	045-20193	HMU Federal 24-13B (D25W)	AL	
420632	WELL	XX	11/21/2012	LO	045-20194	HMU Fee 24-15C (D25W)	XX	✗
420634	WELL	XX	11/21/2012	LO	045-20195	HMU Federal 25-4B (D25W)	XX	✗
420636	WELL	XX	11/21/2012	LO	045-20196	HMU Federal 25-3C (D25W)	XX	✗
420637	WELL	XX	11/21/2012	LO	045-20197	HMU Fee 25-6B (D25W)	XX	✗
420638	WELL	XX	11/21/2012	LO	045-20198	HMU Fee 23-16B (D25W)	XX	✗
420639	WELL	XX	01/30/2013	LO	045-20199	HMU Federal 26-1A (D25W)	XX	✗
420641	WELL	XX	11/21/2012	LO	045-20200	HMU Fee 23-16D (D25W)	XX	✗
420642	WELL	XX	11/21/2012	LO	045-20201	HMU Fee 23-16BB (D25W)	XX	✗
420643	WELL	XX	11/21/2012	LO	045-20202	HMU Fee 23-16C (D25W)	XX	✗
422050	WELL	XX	01/30/2013	LO	045-20484	HMU Federal 25-4C (D25W)	XX	✗
422053	WELL	XX	01/30/2013	LO	045-20487	HMU Federal 26-1CC (D25W)	XX	✗

Equipment:

Location Inventory

Special Purpose Pits: <u>1</u>	Drilling Pits: <u> </u>	Wells: <u>19</u>	Production Pits: <u> </u>
Condensate Tanks: <u> </u>	Water Tanks: <u> </u>	Separators: <u>19</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> </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	AIRES 045-1374-001		

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
<input type="checkbox"/> Multiple Spills and Releases?				

Fencing/:				
Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date

Equipment:				
Type: Horizontal Heated Separator	# 3	Satisfactory/Action Required:	SATISFACTORY	
Comment				
Corrective Action				Date:
Type: Gas Meter Run	# 2	Satisfactory/Action Required:	SATISFACTORY	
Comment				
Corrective Action				Date:
Type: Ancillary equipment	# 1	Satisfactory/Action Required:	SATISFACTORY	
Comment	Chemical unit at pig station			
Corrective Action				Date:
Type: Pig Station	# 1	Satisfactory/Action Required:	SATISFACTORY	
Comment				
Corrective Action				Date:
Type: Plunger Lift	# 3	Satisfactory/Action Required:	SATISFACTORY	
Comment				
Corrective Action				Date:

Facilities: <input type="checkbox"/> New Tank Tank ID: _____				
Contents	#	Capacity	Type	SE GPS
METHANOL	1	1000 GAL	STEEL AST	,
S/AR	SATISFACTORY		Comment:	Centrlized battery
Corrective Action:				Corrective Date:

Paint				
Condition	Adequate			
Other (Content)	_____			
Other (Capacity)	_____			
Other (Type)	_____			

Berms				
Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Corrective Action				Corrective Date
Comment				

Facilities: <input type="checkbox"/> New Tank Tank ID: _____				
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Contents	#	Capacity	Type	SE GPS
CONDENSATE	2	300 BBLS	STEEL AST	39.423304,-107.730721

S/AR	SATISFACTORY	Comment:
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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
Comment	

Venting:

Yes/No	NO
Comment	

Flaring:

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

Predrill

Location ID: 280630

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

S/AR: _____

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

Form 2A COAs:

Group	User	Comment	Date
OGLA	kubeczko	Operator 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 sufficiently protective of nearby surface water. If fluids are conveyed via pipeline, operator must implement best management practices to contain any unintentional release of fluids.	09/29/2010
OGLA	kubeczko	Location may be in a sensitive area because of shallow groundwater; therefore either a lined drilling pit or closed loop system (which EnCana has already indicated on the Form 2A) must be implemented.	09/29/2010
OGLA	kubeczko	Operator must implement best management practices to contain any unintentional release of fluids.	09/29/2010

OGLA	kubeczkod	Location may be in a sensitive area because of shallow groundwater; therefore any pits containing fluids (if constructed) must be lined.	09/29/2010
OGLA	kubeczkod	No portion of any pit that will be used to hold liquids shall be constructed on fill material, unless the pit and fill slope are designed and certified by a professional engineer, subject to review and approval by the director prior to construction of the pit. The construction and lining of the pit shall be supervised by a professional engineer or their agent. The entire base of the pit must be in cut.	09/29/2010
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.	09/29/2010
OGLA	kubeczkod	All pits containing fluids (if constructed; reserve pit, production pit, frac pit) must be lined.	09/29/2010

S/AR: SATISFACTORY **Comment:** No drilling or completions being performed at time of inspection, No visual sign of cuttings or pits

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: 280630 Type: WELL API Number: 045-11302 Status: PR Insp. Status: PR

Producing Well

Comment: Plunger lift

Facility ID: <u>280631</u>	Type: <u>WELL</u>	API Number: <u>045-11301</u>	Status: <u>PR</u>	Insp. Status: <u>PR</u>
Producing Well				
Comment: <u>Plunger lift</u>				
Facility ID: <u>291925</u>	Type: <u>WELL</u>	API Number: <u>045-14546</u>	Status: <u>PR</u>	Insp. Status: <u>PR</u>
Producing Well				
Comment: <u>Plunger lift</u>				
Facility ID: <u>420624</u>	Type: <u>WELL</u>	API Number: <u>045-20189</u>	Status: <u>XX</u>	Insp. Status: <u>XX</u>
Facility ID: <u>420626</u>	Type: <u>WELL</u>	API Number: <u>045-20190</u>	Status: <u>XX</u>	Insp. Status: <u>XX</u>
Facility ID: <u>420627</u>	Type: <u>WELL</u>	API Number: <u>045-20191</u>	Status: <u>XX</u>	Insp. Status: <u>XX</u>
Facility ID: <u>420628</u>	Type: <u>WELL</u>	API Number: <u>045-20192</u>	Status: <u>XX</u>	Insp. Status: <u>XX</u>
Facility ID: <u>420632</u>	Type: <u>WELL</u>	API Number: <u>045-20194</u>	Status: <u>XX</u>	Insp. Status: <u>XX</u>
Facility ID: <u>420634</u>	Type: <u>WELL</u>	API Number: <u>045-20195</u>	Status: <u>XX</u>	Insp. Status: <u>XX</u>
Facility ID: <u>420636</u>	Type: <u>WELL</u>	API Number: <u>045-20196</u>	Status: <u>XX</u>	Insp. Status: <u>XX</u>
Facility ID: <u>420637</u>	Type: <u>WELL</u>	API Number: <u>045-20197</u>	Status: <u>XX</u>	Insp. Status: <u>XX</u>
Facility ID: <u>420638</u>	Type: <u>WELL</u>	API Number: <u>045-20198</u>	Status: <u>XX</u>	Insp. Status: <u>XX</u>
Facility ID: <u>420639</u>	Type: <u>WELL</u>	API Number: <u>045-20199</u>	Status: <u>XX</u>	Insp. Status: <u>XX</u>
Facility ID: <u>420641</u>	Type: <u>WELL</u>	API Number: <u>045-20200</u>	Status: <u>XX</u>	Insp. Status: <u>XX</u>
Facility ID: <u>420642</u>	Type: <u>WELL</u>	API Number: <u>045-20201</u>	Status: <u>XX</u>	Insp. Status: <u>XX</u>
Facility ID: <u>420643</u>	Type: <u>WELL</u>	API Number: <u>045-20202</u>	Status: <u>XX</u>	Insp. Status: <u>XX</u>
Facility ID: <u>422050</u>	Type: <u>WELL</u>	API Number: <u>045-20484</u>	Status: <u>XX</u>	Insp. Status: <u>XX</u>
Facility ID: <u>422053</u>	Type: <u>WELL</u>	API Number: <u>045-20487</u>	Status: <u>XX</u>	Insp. Status: <u>XX</u>

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): N

Comment: _____

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

Reclamation - Storm Water - Pit

Interim Reclamation:

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

Land Use: RANGELAND

Comment: Interim Reclamation in process at time of inspection, equipment and personal on location

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: _____

Inspector Name: Murray, Richard

Overall Interim Reclamation _____

Final Reclamation/ Abandoned Location:

Date Final Reclamation Started: _____ Date Final Reclamation Completed: _____

Final Land Use: RANGELAND, TIMBER _____

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			
		Rip Rap	Pass			
		Ditches	Pass			
Sediment Traps						
		Culverts	Pass			
Seeding						
Berms						
Waddles	Pass					
Ditches						

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

Comment: Equipment and personal on location working on stormwater BMPs

CA: _____

Pits: NO SURFACE INDICATION OF PIT