

**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:

08/10/2016

Document Number:

666802478

Overall Inspection:

SATISFACTORY**FIELD INSPECTION FORM**

| | | | | | |
|---------------------|-------------|--------|-----------------|--------------------------|-------------|
| Location Identifier | Facility ID | Loc ID | Inspector Name: | On-Site Inspection | 2A Doc Num: |
| | 261016 | 334859 | 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: SENW Sec: 33 Twp: 6S Range: 92W

| Insp. Date | Doc Num | Insp. Type | Insp Status | Satisfactory /Action Required | PA P/F/I | Pas/Fail (P/F) | Violation (Y/N) |
|------------|-----------|------------|-------------|-------------------------------|------------|----------------|-----------------|
| 01/05/2016 | 666801783 | PR | PR | SATISFACTORY | | | No |
| 09/03/2007 | 200118373 | CO | PR | ACTION REQUIRED | In Process | | No |
| 06/04/2007 | 200114366 | PR | PR | ACTION REQUIRED | In Process | Fail | Yes |
| 02/01/2007 | 200107493 | PR | PR | SATISFACTORY | In Process | Pass | No |

Inspector Comment:**Related Facilities:**

| Facility ID | Type | Status | Status Date | Well Class | API Num | Facility Name | Insp Status | |
|-------------|------|--------|-------------|------------|-----------|-----------------------|-------------|-------------------------------------|
| 211532 | WELL | PR | 07/15/1998 | GW | 045-07292 | BOULTON 33-6 | PR | <input checked="" type="checkbox"/> |
| 261014 | WELL | PR | 01/16/2003 | GW | 045-07925 | SHIDELER 33-3A (F33) | PR | <input checked="" type="checkbox"/> |
| 261015 | WELL | PR | 01/07/2003 | GW | 045-07926 | SHIDELER 33-3 (F33) | PR | <input checked="" type="checkbox"/> |
| 261016 | WELL | PR | 01/12/2003 | GW | 045-07927 | BOULTON 33-6A (F33) | PR | <input checked="" type="checkbox"/> |
| 263373 | WELL | PR | 01/21/2003 | GW | 045-08127 | SHIDELER 33-4C2 (F33) | PR | <input checked="" type="checkbox"/> |

Equipment:Location Inventory

Inspector Name: Murray, Richard

| | | | |
|------------------------------|------------------------|---------------------|-------------------------|
| 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

Signs/Marker:

| Type | Satisfactory/Action Required | Comment | Corrective Action | CA Date |
|----------------------|------------------------------|----------------------|-------------------|---------|
| BATTERY | SATISFACTORY | AIRS ID 045-0621-001 | | |
| TANK LABELS/PLACARDS | SATISFACTORY | | | |
| WELLHEAD | SATISFACTORY | | | |

Emergency Contact Number (S/AR): SATISFACTORY

Corrective Date: _____

Comment: _____

Corrective Action: _____

Spills:

| Type | Area | Volume | Corrective action | CA Date |
|------|------|--------|-------------------|---------|
|------|------|--------|-------------------|---------|

☐ Multiple Spills and Releases?

Equipment:

| | | | |
|---------------------------------|-----|-------------------------------|--------------|
| Type: Vertical Heated Separator | # 5 | Satisfactory/Action Required: | SATISFACTORY |
| Comment | | | |
| Corrective Action | | | Date: |
| Type: Plunger Lift | # 5 | Satisfactory/Action Required: | SATISFACTORY |
| Comment | | | |
| Corrective Action | | | Date: |
| 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: |

Tanks and Berms:

☐ 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

Inspector Name: Murray, Richard

| | | | | |
|-------------------|----------|---------------------|---------------------|-----------------|
| Condition | Adequate | | | |
| Other (Content) | | | | |
| Other (Capacity) | | | | |
| Other (Type) | | | | |
| <u>Berms</u> | | | | |
| Type | Capacity | Permeability (Wall) | Permeability (Base) | Maintenance |
| | | | | |
| Corrective Action | | | | Corrective Date |
| Comment | | | | |

Tanks and Berms: ☐ New Tank Tank ID: _____

| | | | | |
|--------------------|--------------|----------------------------------|-----------|-----------------------|
| Contents | # | Capacity | Type | SE GPS |
| CONDENSATE | 1 | <100 BBLS | STEEL AST | 39.484611,-107.675341 |
| S/AR | SATISFACTORY | Comment: Hooked up to Bradenhead | | |
| Corrective Action: | | | | Corrective Date: |

Paint

| | | | | |
|-------------------|----------|---------------------|---------------------|-----------------|
| Condition | Adequate | | | |
| Other (Content) | | | | |
| Other (Capacity) | | | | |
| Other (Type) | | | | |
| <u>Berms</u> | | | | |
| Type | Capacity | Permeability (Wall) | Permeability (Base) | Maintenance |
| Earth | Adequate | Walls Sufficient | Base Sufficient | Adequate |
| Corrective Action | | | | Corrective Date |
| Comment | | | | |

Tanks and Berms: ☐ New Tank Tank ID: _____

| | | | | |
|--------------------|--------------|----------|-----------|-----------------------|
| Contents | # | Capacity | Type | SE GPS |
| CONDENSATE | 2 | 300 BBLS | STEEL AST | 39.484643,-107.675262 |
| S/AR | SATISFACTORY | Comment: | | |
| Corrective Action: | | | | Corrective Date: |

Paint

| | | | | |
|-------------------|----------|---------------------|---------------------|-----------------|
| Condition | Adequate | | | |
| Other (Content) | | | | |
| Other (Capacity) | | | | |
| Other (Type) | | | | |
| <u>Berms</u> | | | | |
| Type | Capacity | Permeability (Wall) | Permeability (Base) | Maintenance |
| Metal | Adequate | Walls Sufficient | Base Sufficient | Adequate |
| Corrective Action | | | | Corrective Date |
| Comment | | | | |

Venting:

Inspector Name: Murray, Richard

| | |
|---------|----|
| Yes/No | NO |
| Comment | |

| | | | |
|--------------------|--|------------------------------|--|
| Flaring: | | | |
| Type | | Satisfactory/Action Required | |
| Comment: | | | |
| Corrective Action: | | Correct Action Date: | |

| | | | |
|--------------------|--------|-----------------|--|
| Predrill | | | |
| Location ID: | 261016 | | |
| 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): |
|----------------------------------|

| | |
|---|-------------|
| <u>Surface Owner Contact Information:</u> | |
| Name: | Address: |
| Phone Number: | Cell Phone: |

| | |
|---|--------------------------------|
| <u>Operator Rep. Contact Information:</u> | |
| Landman Name: | Phone Number: |
| Date Onsite Request Received: | Date of Rule 306 Consultation: |

| |
|-------------------------|
| Request LGD Attendance: |
|-------------------------|

| | | |
|---------------------------------|---------------|-------------------|
| <u>LGD Contact Information:</u> | | |
| Name: | Phone Number: | Agreed to Attend: |

| | |
|-------------------------------------|--|
| <u>Summary of Landowner Issues:</u> | |
| | |

| | |
|--|--|
| <u>Summary of Operator Response to Landowner Issues:</u> | |
| | |

| | |
|--|--|
| <u>Onsite Inspection Memorandum Summarizing Discussions at Inspection as Attachment:</u> | |
| | |

| | | | | | | | | | |
|-----------------|--------|-------|------|-------------|-----------|---------|----|---------------|----|
| Facility | | | | | | | | | |
| Facility ID: | 211532 | Type: | WELL | API Number: | 045-07292 | Status: | PR | Insp. Status: | PR |

| | |
|-----------------------|--------------|
| Producing Well | |
| Comment: | Plunger lift |

| | | | | | | | | | |
|--------------|--------|-------|------|-------------|-----------|---------|----|---------------|----|
| Facility ID: | 261014 | Type: | WELL | API Number: | 045-07925 | Status: | PR | Insp. Status: | PR |
|--------------|--------|-------|------|-------------|-----------|---------|----|---------------|----|

Inspector Name: Murray, Richard

Producing Well

Comment: **Plunger lift**

Facility ID: 261015 Type: WELL API Number: 045-07926 Status: PR Insp. Status: PR

Producing Well

Comment: **Plunger lift**

Facility ID: 261016 Type: WELL API Number: 045-07927 Status: PR Insp. Status: PR

Producing Well

Comment: **Plunger lift. Bradenhead hooked up to 80bbls tank**

Facility ID: 263373 Type: WELL API Number: 045-08127 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:

Pilot: ON 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 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 ☐

Inspector Name: Murray, Richard

| | | | | | | |
|---------------------|-----------------|-------------------------|-----------------------|---------------|--------------------------|---------|
| Storm Water: | | | | | | |
| Loc Erosion BMPs | BMP Maintenance | Lease Road Erosion BMPs | Lease BMP Maintenance | Chemical BMPs | Chemical BMP Maintenance | Comment |
| | | Ditches | Pass | | | |
| | | Rip Rap | Pass | | | |
| Gravel | Pass | | | | | |
| Berms | Pass | | | | | |
| | | Culverts | Pass | | | |
| Waddles | Pass | | | | | |
| Ditches | Pass | | | | | |
| | | Gravel | Pass | | | |
| Seeding | Pass | | | | | |

S/A/V: SATISFACTORY Corrective Date: _____

Comment: _____

CA: _____

Pits: ☐ NO SURFACE INDICATION OF PIT

Attached Documents

You can go to COGCC Images (<https://cogcc.state.co.us/weblink/>) and search by document number:

| Document Num | Description | URL |
|--------------|---------------------|---|
| 666802478 | INSPECTION APPROVED | http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3925013 |