

**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:

08/17/2016

Document Number:

666802496

Overall Inspection:

SATISFACTORY**FIELD INSPECTION FORM**

| | | | | | |
|---------------------|-------------|--------|-----------------|--------------------------|-------------|
| Location Identifier | Facility ID | Loc ID | Inspector Name: | On-Site Inspection | 2A Doc Num: |
| | 274668 | 335308 | 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: NWSE Sec: 26 Twp: 6S Range: 93W

| Insp. Date | Doc Num | Insp. Type | Insp Status | Satisfactory /Action Required | PA P/F/I | Pas/Fail (P/F) | Violation (Y/N) |
|------------|-----------|------------|-------------|-------------------------------|----------|----------------|-----------------|
| 01/17/2014 | 670201165 | PR | PR | SATISFACTORY | | | No |

Inspector Comment:**Related Facilities:**

| Facility ID | Type | Status | Status Date | Well Class | API Num | Facility Name | Insp Status | |
|-------------|------|--------|-------------|------------|-----------|-----------------------|-------------|-------------------------------------|
| 270232 | WELL | PR | 03/11/2004 | GW | 045-09498 | BENZEL 26-7C (J26NW) | PR | <input checked="" type="checkbox"/> |
| 270233 | WELL | PR | 03/20/2004 | GW | 045-09497 | BENZEL 26-10B (J26NW) | PR | <input checked="" type="checkbox"/> |
| 274664 | WELL | PR | 08/13/2005 | GW | 045-13374 | GMU 26-14B (J26NW) | PR | <input checked="" type="checkbox"/> |
| 274665 | WELL | PR | 08/02/2005 | GW | 045-13373 | GMU 26-12A (J26NW) | PR | <input checked="" type="checkbox"/> |
| 274666 | WELL | PR | 08/06/2005 | GW | 045-13372 | GMU 26-11C (J26NW) | PR | <input checked="" type="checkbox"/> |
| 274667 | WELL | PR | 08/11/2005 | GW | 045-13371 | GMU 26-14A (J26NW) | PR | <input checked="" type="checkbox"/> |
| 274668 | WELL | PR | 07/31/2005 | GW | 045-13370 | GMU 26-5D (J26NW) | 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 045-0846-001 | | |
| 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: 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: Vertical Heated Separator | # 7 | Satisfactory/Action Required: | SATISFACTORY |
| Comment | | | |
| Corrective Action | | | Date: |
| Type: Plunger Lift | # 7 | Satisfactory/Action Required: | SATISFACTORY |
| Comment | | | |
| Corrective Action | | | Date: |

Tanks and Berms:

☐ New Tank

Tank ID: _____

| Contents | # | Capacity | Type | SE GPS |
|------------|---|----------|-----------|-----------------------|
| CONDENSATE | 2 | 500 BBLS | STEEL AST | 39.494940,-107.742403 |

S/AR SATISFACTORY Comment: _____

Corrective Action: _____ Corrective Date: _____

Paint

Inspector Name: Murray, Richard

| | | | | | |
|-------------------|----------|---------------------|---------------------|-----------------|--|
| Condition | Adequate | | | | |
| 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: 274668

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: 270232 Type: WELL API Number: 045-09498 Status: PR Insp. Status: PR

Producing Well

Comment: Plunger lift

Facility ID: 270233 Type: WELL API Number: 045-09497 Status: PR Insp. Status: PR

Producing Well

Comment: Plunger lift

Facility ID: 274664 Type: WELL API Number: 045-13374 Status: PR Insp. Status: PR

Producing Well

Comment: Plunger lift

Facility ID: 274665 Type: WELL API Number: 045-13373 Status: PR Insp. Status: PR

Inspector Name: Murray, Richard

Producing Well

Comment: **Plunger lift**

Facility ID: 274666 Type: WELL API Number: 045-13372 Status: PR Insp. Status: PR

Producing Well

Comment: **Plunger lift**

Facility ID: 274667 Type: WELL API Number: 045-13371 Status: PR Insp. Status: PR

Producing Well

Comment: **Plunger lift**

Facility ID: 274668 Type: WELL API Number: 045-13370 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 | | | | |
| Gravel | Pass | | | | | |
| | | Gravel | | | | |
| Berms | Pass | | | | | |
| Ditches | Pass | | | | | |
| Retention Ponds | Pass | | | | | |

S/A/V: SATISFACTORY Corrective Date: _____

Comment: _____

CA: _____

| |
|---|
| Pits: <input checked="" type="checkbox"/> 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 |
|--------------|----------------------|---|
| 666802496 | INSPECTION SUBMITTED | http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3931205 |