

**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:

08/26/2016

Document Number:

685301229

Overall Inspection:

SATISFACTORY**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	214839	312121	St John, William (Cal)	<input type="checkbox"/>	

Operator Information:OGCC Operator Number: 96705Name of Operator: WPX ENERGY PRODUCTION LLCAddress: P O BOX 3102 MS-25-2City: TULSA State: OK Zip: 74101

- ☐ 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
Labowskie, Steve		steve.labowskie@state.co.us	COGCC
Inspection, WPX	970-263-2716	COGCCInspectionReportsSanJuan@wpxenergy.com	WPX Inspection Mailbox

Compliance Summary:QtrQtr: SESW Sec: 20 Twp: 33N Range: 9W

Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Action Required	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
03/18/2014	674600106	PR	PR	SATISFACTORY	Pass		No
07/26/2007	200115702	CO	PR	SATISFACTORY		Pass	No
06/13/2007	200112945	CO	PR	ACTION REQUIRED		Fail	Yes
04/11/2006	200092731	PR	PR	SATISFACTORY		Pass	No
11/04/2004	200066027	PR	PR	SATISFACTORY		Pass	No
02/24/2004	200052853	PR	PR	SATISFACTORY		Pass	No
08/20/2003	200044689	PR	PR	SATISFACTORY		Pass	No
11/02/2001	200021966	PR	PR	SATISFACTORY		Pass	No
09/28/2000	200010394	PR	PR	SATISFACTORY		Pass	No
04/18/2000	200006833	BH	PR	SATISFACTORY		Pass	No
06/22/1999	500147948	PR	PR			Pass	No
06/22/1999	500147951	PR	PR			Pass	No
12/05/1997	500147950	PR	PR			Pass	No
03/10/1997	500147947	PR	PR			Pass	No
09/13/1994	500147949	PR	PR			Pass	No

Inspector Comment:

Inspection report contains comments. See Lease Road and Stormwater Sections for additional details.

Related Facilities:

Inspector Name: St John, William (Cal)

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status	
214839	WELL	PR	06/24/1981	GW	067-06443	CARR 1-M	PR	<input checked="" type="checkbox"/>
297035	WELL	AL	09/01/2009	LO	067-09596	COYOTE CANYON 33-9 20-3A	AL	<input type="checkbox"/>

Equipment:Location Inventory

Special Purpose Pits: _____	Drilling Pits: _____	Wells: _____	Production Pits: _____
Condensate Tanks: _____	Water Tanks: _____	Separators: _____	Electric Motors: _____
Gas or Diesel Motors: _____	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	Rough and rutted. Monsoon seasonal rains are taking toll on access road.		

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: _____

Corrective Action: _____

Spills:

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

☐ Multiple Spills and Releases?**Fencing/:**

Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
PIT	SATISFACTORY	Post and Hog Wire.		

Equipment:

Type: Compressor	# 1	Satisfactory/Action Required: SATISFACTORY
Comment		
Corrective Action		Date: _____
Type: Deadman # & Marked	# 4	Satisfactory/Action Required: SATISFACTORY
Comment		
Corrective Action		Date: _____

Inspector Name: St John, William (Cal)

Type: Flow Line	# 1	Satisfactory/Action Required:	SATISFACTORY
Comment			
Corrective Action			Date:
Type: Gas Meter Run	# 1	Satisfactory/Action Required:	SATISFACTORY
Comment			
Corrective Action			Date:
Type: Horizontal Heated Separator	# 2	Satisfactory/Action Required:	SATISFACTORY
Comment			
Corrective Action			Date:
Type: Bird Protectors	# 2	Satisfactory/Action Required:	SATISFACTORY
Comment			
Corrective Action			Date:
Type: Ancillary equipment	# 1	Satisfactory/Action Required:	SATISFACTORY
Comment Telemetry Equipment			
Corrective Action			Date:
Type: Ancillary equipment	# 1	Satisfactory/Action Required:	SATISFACTORY
Comment Wellhead			
Corrective Action			Date:

Tanks and Berms:☐ New Tank

Tank ID: _____

Contents	#	Capacity	Type	SE GPS
PRODUCED WATER	1	OTHER	Open Top	,
S/AR	SATISFACTORY		Comment: Steel Mesh Top	
Corrective Action:			Corrective Date:	

Paint

Condition	Adequate
-----------	----------

Other (Content) _____

Other (Capacity) 125 BBLS _____

Other (Type) _____

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Earth	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: 214839

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: <u>214839</u>	Type: <u>WELL</u>	API Number: <u>067-06443</u>	Status: <u>PR</u>	Insp. Status: <u>PR</u>
----------------------------	-------------------	------------------------------	-------------------	-------------------------

Producing Well

Comment: PR

Environmental

Spills/Releases:

Type of Spill: _____ Description: _____ Estimated Spill Volume: _____

Comment: _____

Corrective Action: _____ Date: _____

Inspector Name: St John, William (Cal)

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): _____

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 REVEGETATION

Cropland

Top soil replaced _____ Recontoured _____ Perennial forage re-established _____

Non-Cropland

Top soil replaced _____ Recontoured _____ 80% Revegetation _____

Inspector Name: St John, William (Cal)

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
Berms	Pass	Compaction	Pass	Material Handling And Spill Prevention	Pass	
Ditches	Pass					
Compaction	Pass					

S/A/V: SATISFACTORY

Corrective Date: _____

Comment: Ditch and berm along bottom of cut slope require maintenance. Ditch is approximately 75% full of sediment coming off cut slope.

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
685301229	INSPECTION APPROVED	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3943167