

**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:  
09/01/2016  
Document Number:  
668004756

**FIELD INSPECTION FORM**

|                     |             |        |                 |                    |                          |
|---------------------|-------------|--------|-----------------|--------------------|--------------------------|
| Location Identifier | Facility ID | Loc ID | Inspector Name: | On-Site Inspection | <input type="checkbox"/> |
|                     | 217680      | 307451 | DURAN, JOHN     | 2A Doc Num:        |                          |

Overall Inspection:  
SATISFACTORY w/ CMT or AR

**Operator Information:**

OGCC Operator Number: 10084  
Name of Operator: PIONEER NATURAL RESOURCES USA INC  
Address: 5205 N O'CONNOR BLVD STE 200  
City: IRVING State: TX Zip: 75039

- 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         |
|-----------------------|--------------|---------------------------|-----------------|
| Distribution, Pioneer | 972-444-9001 | COGCC.Inspections@pxd.com | All Inspections |

**Compliance Summary:**

QtrQtr: NENE Sec: 15 Twp: 33S Range: 66W

| Insp. Date | Doc Num   | Insp. Type | Insp Status | Satisfactory /Action Required | PA P/F/I   | Pas/Fail (P/F) | Violation (Y/N) |
|------------|-----------|------------|-------------|-------------------------------|------------|----------------|-----------------|
| 12/11/2012 | 668000781 | PR         | PR          | SATISFACTORY                  | Pass       |                | No              |
| 12/08/2008 | 200201049 | PR         | PR          | SATISFACTORY                  |            |                | No              |
| 03/14/2006 | 200087003 | PR         | PR          | SATISFACTORY                  |            | Pass           | No              |
| 04/27/2004 | 200053812 | PR         | PR          | <b>ACTION REQUIRED</b>        |            | <b>Fail</b>    | Yes             |
| 11/02/2000 | 200012432 | PR         | PR          | SATISFACTORY                  | In Process | Pass           | No              |
| 06/13/1997 | 500151980 | DG         | ND          |                               |            | Pass           | No              |

**Inspector Comment:**

**Related Facilities:**

| Facility ID | Type | Status | Status Date | Well Class | API Num   | Facility Name       | Insp Status |                                     |
|-------------|------|--------|-------------|------------|-----------|---------------------|-------------|-------------------------------------|
| 113643      | PIT  | AC     | 09/23/1999  |            | -         | PRIMERO RANCH 15-01 | AC          | <input type="checkbox"/>            |
| 217680      | WELL | PR     | 08/09/2004  | GW         | 071-06459 | MARSHA 41-15        | SI          | <input checked="" type="checkbox"/> |

**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**

| <b>Signs/Marker:</b> |                              |         |                   |         |
|----------------------|------------------------------|---------|-------------------|---------|
| Type                 | Satisfactory/Action Required | Comment | Corrective Action | CA Date |
| WELLHEAD             | SATISFACTORY                 |         |                   |         |

Emergency Contact Number (S/AR): SATISFACTORY Corrective Date: \_\_\_\_\_

Comment: \_\_\_\_\_

Corrective Action: \_\_\_\_\_

| <b>Spills:</b>                                         |      |        |                   |         |
|--------------------------------------------------------|------|--------|-------------------|---------|
| Type                                                   | Area | Volume | Corrective action | CA Date |
| <input type="checkbox"/> Multiple Spills and Releases? |      |        |                   |         |

| <b>Fencing/:</b> |                              |         |                   |         |
|------------------|------------------------------|---------|-------------------|---------|
| Type             | Satisfactory/Action Required | Comment | Corrective Action | CA Date |
| PIT              | SATISFACTORY                 |         |                   |         |

| <b>Equipment:</b>        |     |                               |              |       |  |
|--------------------------|-----|-------------------------------|--------------|-------|--|
| Type: Vertical Separator | # 1 | Satisfactory/Action Required: | SATISFACTORY |       |  |
| Comment                  |     |                               |              |       |  |
| Corrective Action        |     |                               |              | Date: |  |
| Type: Gas Meter Run      | # 1 | Satisfactory/Action Required: | SATISFACTORY |       |  |
| Comment                  |     |                               |              |       |  |
| Corrective Action        |     |                               |              | Date: |  |
| Type: Deadman # & Marked | # 5 | Satisfactory/Action Required: | SATISFACTORY |       |  |
| Comment                  |     |                               |              |       |  |
| Corrective Action        |     |                               |              | Date: |  |
| Type: Progressive Cavity | # 1 | Satisfactory/Action Required: | SATISFACTORY |       |  |
| Comment                  |     |                               |              |       |  |
| Corrective Action        |     |                               |              | Date: |  |

| <b>Venting:</b> |  |
|-----------------|--|
| Yes/No          |  |
| Comment         |  |

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

**Predrill**

Location ID: 217680

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: 217680 Type: WELL API Number: 071-06459 Status: PR Insp. Status: SI

**Idle Well**

Purpose:  Shut In  Temporarily Abandoned Reminder: \_\_\_\_\_

S/A/V: \_\_\_\_\_ CA Date: 02/28/2017

CA: Need to MiT well.

Comment: Production Records : Feb 2015. Shut In : Mar. 2015. No MiT Records found.

**Environmental**

**Spills/Releases:**

Type of Spill: \_\_\_\_\_ Description: \_\_\_\_\_ Estimated Spill Volume: \_\_\_\_\_

Comment: \_\_\_\_\_

Date: \_\_\_\_\_

Corrective Action: \_\_\_\_\_  
 Reportable: \_\_\_\_\_ GPS: Lat \_\_\_\_\_ Long \_\_\_\_\_  
 Proximity to Surface Water: \_\_\_\_\_ Depth to Ground Water: \_\_\_\_\_

**Water Well:** \_\_\_\_\_ Lat \_\_\_\_\_ Long \_\_\_\_\_  
 DWR Receipt Num: \_\_\_\_\_ Owner Name: \_\_\_\_\_ GPS : \_\_\_\_\_

**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

Inspector Name: DURAN, JOHN

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

**Storm Water:**

| Loc Erosion BMPs | BMP Maintenance | Lease Road Erosion BMPs | Lease BMP Maintenance | Chemical BMPs | Chemical BMP Maintenance | Comment |
|------------------|-----------------|-------------------------|-----------------------|---------------|--------------------------|---------|
| Gravel           | Pass            | Gravel                  | Pass                  |               |                          |         |

S/A/V: SATISFACTORY Corrective Date: \_\_\_\_\_

Comment: \_\_\_\_\_

CA: \_\_\_\_\_

Pits:  NO SURFACE INDICATION OF PIT

Inspector Name: DURAN, JOHN

Pit Type: Produced Water Lined: NO Pit ID: \_\_\_\_\_ Lat: \_\_\_\_\_ Long: \_\_\_\_\_

**Lining:**  
Liner Type: \_\_\_\_\_ Liner Condition: \_\_\_\_\_  
Comment: \_\_\_\_\_

**Fencing:**  
Fencing Type: Livestock Fencing Condition: Adequate  
Comment: \_\_\_\_\_

**Netting:**  
Netting Type: \_\_\_\_\_ Netting Condition: \_\_\_\_\_  
Comment: \_\_\_\_\_

Anchor Trench Present: \_\_\_\_\_ Oil Accumulation: NO 2+ feet Freeboard: \_\_\_\_\_  
Pit (S/AV): SATISFACTOR Comment: 30' x 70'  
Corrective Action: \_\_\_\_\_ Date: \_\_\_\_\_

**COGCC Comments**

| Comment                                                                                                                         | User   | Date       |
|---------------------------------------------------------------------------------------------------------------------------------|--------|------------|
| <a href="#">Production Records : Feb. 2015. Shut In : Mar. 2015. No MIT Records found. Need to MIT on or before (02/28/17).</a> | duranj | 09/16/2016 |

**Attached Documents**

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

| Document Num | Description         | URL                                                                                                                                                                 |
|--------------|---------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 668004756    | INSPECTION APPROVED | <a href="http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3953258">http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3953258</a> |