

**FORM
INSP**

Rev
X/15

**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:

09/20/2016

Submitted Date:

09/20/2016

Document Number:

685301460

FIELD INSPECTION FORM

Loc ID 333878 Inspector Name: St John, William (Cal) On-Site Inspection 2A Doc Num: _____

Status Summary:

- THIS IS A FOLLOW UP INSPECTION
- FOLLOW UP INSPECTION REQUIRED
- NO FOLLOW UP INSPECTION REQUIRED

Operator Information:

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

Findings:

- 10 Number of Comments
- 1 Number of Corrective Actions
- Corrective Action Response Requested

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

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
256258	WELL	PR	08/01/2001	GW	067-08277	IGNACIO 33-8 8A	PR
258643	WELL	PR	08/02/2001	GW	067-08370	IGNACIO 33-8 2A	PR

General Comment:

[Inspection report contains corrective action and comment. See Signs/Marker Section for additional details.](#)

Location

Lease Road:			
Type	Access		
comment:			
Corrective ActionL			Date:

Overall Good:

Signs/Marker:			
Type	WELLHEAD		
Comment:			
Corrective Action:			Date:
Type	TANK LABELS/PLACARDS		
Comment:	No sign and no placards.		
Corrective Action:	Install sign to comply with Rule 210.d		Date: 11/21/2016

Emergency Contact Number:

Comment:			
Corrective Action:			Date: _____

Overall Good:

Spills:			
Type	Area	Volume	

In Containment: No

Comment: _____

Multiple Spills and Releases?

Equipment:			corrective date
Type: Horizontal Heated Separator	# 2		
Comment:			
Corrective Action:			Date:
Type: Ancillary equipment	# 2		
Comment:	Telemetry Equipment		
Corrective Action:			Date:
Type: Ancillary equipment	# 2		
Comment:	Wellhead		
Corrective Action:			Date:
Type: Bird Protectors	# 2		
Comment:			
Corrective Action:			Date:
Type: Plunger Lift	# 2		
Comment:			
Corrective Action:			Date:
Type: Flow Line	# 2		

Comment:			
Corrective Action:			Date:
Type: Other	# 1		
Comment:	Cathodic Protection Equipment		
Corrective Action:			Date:
Type: Gas Meter Run	# 2		
Comment:			
Corrective Action:			Date:

Tanks and Berms:

Contents	#	Capacity	Type	Tanak ID	SE GPS
PRODUCED WATER	1	OTHER	Open Top		
Comment:	Steel Mesh Top				
Corrective Action:					Date:

Paint

Condition	Adequate	
Other (Content)		
Other (Capacity)	UNKNOWN	
Other (Type)		

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Metal	Adequate	Walls Sufficent	Base Sufficent	Adequate
Comment:				
Corrective Action:				Date:

Venting:

Yes/No	NO	
Comment:		
Corrective Action:		Date:

Flaring:

Type	
Comment:	
Corrective Action:	Date:

Inspected Facilities

Facility ID: 256258 Type: WELL API Number: 067-08277 Status: PR Insp. Status: PR

Producing Well

Comment: PR

Corrective Action:

Date:

Facility ID: 258643 Type: WELL API Number: 067-08370 Status: PR Insp. Status: PR

Producing Well

Comment: PR

Corrective Action:

Date:

Reclamation - Storm Water - Pit

Storm Water:

Loc Erosion BMPs	BMP Maintenance	Lease Road Erosion BMPs	Lease BMP Maintenance	Chemical BMPs	Chemical BMP Maintenance	Comment
Gravel	Pass	Gravel	Pass			
Compaction	Pass	Compaction	Pass	Material Handling And Spill Prevention	Pass	

Comment:

Corrective Action:

Date: _____

Pits: NO SURFACE INDICATION OF PIT