

**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:

06/27/2017

Submitted Date:

06/30/2017

Document Number:

687900100

**FIELD INSPECTION FORM**

Loc ID 308449 Inspector Name: DURAN, JOHN 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: 10084  
Name of Operator: PIONEER NATURAL RESOURCES USA INC  
Address: 5205 N O'CONNOR BLVD STE 200  
City: IRVING State: TX Zip: 75039

**Findings:**

3 Number of Comments  
0 Number of Corrective Actions  
 Corrective Action Response Requested

**Contact Information:**

Contact Name	Phone	Email	Comment
Distribution, Pioneer	972-444-9001	COGCC.Inspections@pxd.com	<a href="#">All Inspections</a>

**Inspected Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
272254	WELL	PR	05/12/2006	GW	071-08059	STARLIGHT 22-28	PR

**General Comment:**

**Location**

Overall Good:

**Signs/Marker:**

	Type WELLHEAD		
Comment:			
Corrective Action:		Date:	

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: Vertical Separator	# 1				
Comment:					
Corrective Action:		Date:			
Type: Progressive Cavity	# 1				
Comment:					
Corrective Action:		Date:			
Type: Gas Meter Run	# 1				
Comment:					
Corrective Action:		Date:			
Type: Deadman # & Marked	# 4				
Comment:					
Corrective Action:		Date:			

**Venting:**

Yes/No			
Comment:			
Corrective Action:		Date:	

**Flaring:**

Type			
Comment:			
Corrective Action:		Date:	

**Inspected Facilities**

Facility ID: 272254 Type: WELL API Number: 071-08059 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			

Comment:

Corrective Action:

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

**Pits:**     NO SURFACE INDICATION OF PIT

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

Reference Point: \_\_\_\_\_      Other: \_\_\_\_\_      Length: \_\_\_\_\_      Width: \_\_\_\_\_

**Lining:**

Liner Type:      Liner Condition:

Comment:

Corrective Action

Date: c

**Fencing:**

Fencing Type:      Fencing Condition:

Comment:

Corrective Action

Date:

**Netting:**

Netting Type:      Netting Condition:

Comment:

Corrective Action

Date:

Anchor Trench Present:      Oil Accumulation: NO      2+ feet Freeboard: YES

Comment: 30' x 70'

Corrective Action

Date:

Permit:	Facility ID	Permit Num	Expiration Date
	279853	1140269	

Monitoring:	Monitoring Type	Comment`
	Chain	