

**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:

08/02/2017

Submitted Date:

08/08/2017

Document Number:

685303635**FIELD INSPECTION FORM**Loc ID 333608 Inspector Name: St John, William (Cal) On-Site Inspection ☐ 2A Doc Num: _____**Operator Information:**OGCC Operator Number: 100264Name of Operator: XTO ENERGY INCAddress: PO BOX 6501City: ENGLEWOOD State: CO Zip: 80155**Status Summary:**

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

Findings:18 Number of Comments0 Number of Corrective Actions☐ Corrective Action Response Requested**Contact Information:**

Contact Name	Phone	Email	Comment
Trobaugh, Robert	505-333-3185	robert_trobaugh@xtoenergy.com	SW Inspection Reports
Woolley, Jeff	505-333-3222	Jeff_Woolley@xtoenergy.com	SW Inspection Reports
Hixon, Logan	505-386-8018	logan_hixon@xtoenergy.com	SW EHS Tech
Browning, Chuck		chuck.browning@state.co.us	

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
215940	WELL	PR	04/13/1991	GW	067-07545	HUBER-TINKER 1-9	PR
216329	WELL	IJ	05/30/2006	DSPW	067-07935	TINKER 2-9 WD	AC

General Comment:

Routine UIC inspection. Active injection at time of inspection. See link at end of report for path to downloadable pictures.

Location				
Lease Road:				
Type	Access			
comment:	Dirt and gravel access road.			
Corrective Action	L			Date:
Overall Good: <input type="checkbox"/>				
Signs/Marker:				
Type	WELLHEAD			
Comment:	Metal sign posted at wellhead and separator.			
Corrective Action:				Date:
Emergency Contact Number:				
Comment:	Operator contact information posted on wellhead sign.			
Corrective Action:				Date: _____
Overall Good: <input type="checkbox"/>				
Spills:				
Type	Area	Volume		
In Containment: No				
Comment:				
<input type="checkbox"/> Multiple Spills and Releases?				
Equipment:				
Type: Vertical Heated Separator	# 1			corrective date
Comment:				
Corrective Action:				Date:
Type: Flow Line	# 4			
Comment:	In use - 6" steel line from remote Injection pump outlet to Huber-Tinker 2-9 wellhead. In use - 3" steel line from Huber-Tinker 1-9 wellhead tubing to separator inlet. All points co-located. In use - 3" steel line from Huber-Tinker 1-9 wellhead casing to separator inlet. All points co-located. In use - 1" steel gas supply line from Huber-Tinker 1-9 separator outlet to Huber-Tinker 1-9 wellhead. All points co-located.			
Corrective Action:				Date:
Type: Bird Protectors	# 1			
Comment:				
Corrective Action:				Date:
Type: Other	# 1			
Comment:	Water can and valve set.			
Corrective Action:				Date:
Type: Ancillary equipment	# 2			
Comment:	Wellhead			
Corrective Action:				Date:
Type: Prime Mover	# 1			

Comment:	Natural gas motor.		Date:	
Corrective Action:			Date:	
Type: Pump Jack	# 1			
Comment:			Date:	
Corrective Action:			Date:	
Type: Horizontal Heated Separator	# 0			
Comment:			Date:	
Corrective Action:			Date:	
Type: Deadman # & Marked	# 7			
Comment:			Date:	
Corrective Action:			Date:	
Type: Gas Meter Run	# 1			
Comment:			Date:	
Corrective Action:			Date:	
Type: Ancillary equipment	# 1			
Comment:	Telemetry equipment.		Date:	
Corrective Action:			Date:	

Tanks and Berms:

Contents	#	Capacity	Type	Tank ID	SE GPS
PRODUCED WATER	0				,
Comment:					
Corrective Action:					Date:

Paint

Condition	
Other (Content)	
Other (Capacity)	
Other (Type)	

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Comment:				
Corrective Action:				Date:

Venting:

Yes/No	NO	
Comment:		
Corrective Action:		Date:

Flaring:

Type	
Comment:	

Corrective Action:		Date:	
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Inspected FacilitiesFacility ID: 215940 Type: WELL API Number: 067-07545 Status: PR Insp. Status: PR**Producing Well**Comment: PR - Review of electronic well file indicates last reported production as May 2017.

Corrective Action:

Date:

Facility ID: 216329 Type: WELL API Number: 067-07935 Status: IJ Insp. Status: AC**Underground Injection Control**

UIC Violation:

Maximum Injection Pressure:

UIC RoutineInj./Tube: Pressure or inches of Hg 1240 Previous Test Pressure _____ MPP _____
(e.g. 30 psig or -30" Hg) Inj Zone: PNLKTC: Pressure or inches of Hg 67.2 Previous Test Pressure _____ Last MIT: 07/17/2014Brhd: Pressure or inches of Hg 0 Previous Test Pressure _____ AnnMTReq: _____Comment: Routine UIC inspection. Active injection at time of inspection. Blew casing down to 0. Well brought up less than 6 - 12 oz fluids in tank. After being blown down the well did not build pressure or bring up any additional fluids.

Corrective Action:

Date: _____

Method of Injection: PUMP FEED

Test Type: _____ Tbg psi: _____ Csg psi: _____ BH psi: _____

Insp. Status: _____

Comment:

Corrective Action:

Date:

Reclamation - Storm Water - Pit**Interim Reclamation:**

Date Interim Reclamation Started: _____ Date Interim Reclamation Completed: _____

Land Use: _____

Comment: Flet location bordered by woodlands and irrigated pasture.**1002 SITE PREPARATION AND STABILIZATION**

1002a. FENCING _____

Comment _____

Corrective Action _____

Date _____

1002b. SOIL REMOVAL AND
SEGREGATION _____

Comment _____

Corrective Action _____

Date _____

1002c. PROTECTION OF SOILS _____

Comment _____

Corrective Action _____

Date _____

1002E. SURFACE DISTURBANCE MINIMIZATION _____

Comment _____

Corrective Action _____

Date _____

1003a. Waste and Debris removed? Pass

Comment _____

Corrective Action _____

Date _____

Unused or unneeded equipment onsite? Pass

Comment _____

Corrective Action _____

Date _____

Pit, cellars, rat holes and other bores closed? Pass

Comment _____

Corrective Action _____

Date _____

Guy line anchors marked? Pass

Comment _____

Corrective Action _____

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 _____

1003e. INTERIM VEGETATION TRANSECT

TRANSECT RESULTS OF DISTURBED AREA% _____

TRANSECT RESULTS OF REFERENCE AREA% _____

TOTAL % OF DESIRABLE VEGETATION COVER _____

VEGETATIVE COVER _____

1003 f. Weeds Noxious weeds? _____ I _____

Comment Canada Thistle growing on N perimeter and NW corner has been treated based on dead and dying vegetation require additional management to prevent spreading.

Corrective Action Date _____

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 _____

1004.d. FINAL VEGETATION TRANSECT

TRANSECT RESULTS OF DISTURBED AREA% _____

TRANSECT RESULTS OF REFERENCE AREA% _____

TOTAL % OF DESIRABLE VEGETATION COVER _____

VEGETATIVE COVER _____

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
Compaction	Pass	Gravel	Pass			
Berms	Pass	Compaction	Pass	Material Handling And Spill Prevention	Pass	Lube oil tank on spill prevention.
Gravel	Pass					

Comment: [Stormwater BMPs appear to be functioning at time of inspection.](#)

Corrective Action:

Date: _____

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
685303653	Wellhead sign for 1-9	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4220662
685303654	Wellhead sign for 2-9	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4220663
685303655	Location overview looking NE.	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4220664
685303656	Location overview looking SE.	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4220665