

FORM
INSPRev
X/15

State of Colorado Oil and Gas Conservation Commission

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Phone: (303) 894-2100 Fax: (303) 894-2109



Inspection Date:

08/02/2017

Submitted Date:

08/10/2017

Document Number:

687900228

FIELD INSPECTION FORM

Loc ID 334178 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:

5 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	All Inspections

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
276197	WELL	PR	12/03/2005	GW	071-08315	SUMMERS 21-19	PR
288795	WELL	PR	03/21/2007	GW	071-09149	SUMMERS 21-19 TR	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: Progressive Cavity	# 2				
Comment:					
Corrective Action:		Date:			
Type: Deadman # & Marked	# 6				
Comment:					
Corrective Action:		Date:			
Type: Gas Meter Run	# 2				
Comment:					
Corrective Action:		Date:			
Type: Vertical Separator	# 2				
Comment:					
Corrective Action:		Date:			

Venting:

Yes/No			
Comment:			
Corrective Action:		Date:	

Flaring:

Type			
Comment:			
Corrective Action:		Date:	

Inspected Facilities

Facility ID: 276197 Type: WELL API Number: 071-08315 Status: PR Insp. Status: PR

Producing Well

Comment: PR

Corrective Action:

Date:

Facility ID: 288795 Type: WELL API Number: 071-09149 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
	294817	1981506	
	294817	1981506	
	288832	1396606	

Monitoring:	Monitoring Type	Comment
	Chain	2 chains