

**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:

09/14/2017

Submitted Date:

09/19/2017

Document Number:

687900409

FIELD INSPECTION FORM

Loc ID 307317 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: 100264
Name of Operator: XTO ENERGY INC
Address: PO BOX 6501
City: ENGLEWOOD State: CO Zip: 80155

Findings:

- 4 Number of Comments
- 0 Number of Corrective Actions
- Corrective Action Response Requested

Contact Information:

Contact Name	Phone	Email	Comment
Fitzgerald, Edie	719-845-2108/719-859-1394	Edie_Fitzgerald@xtoenergy.com	Env. Tech, Raton Basin
Trujillo, Irwin	719-846-0272/719-859-2264	irwin_trujillo@xtoenergy.com	Sr. Env. Tech., Raton Basin
Harrison, Lyndon	505-333-3100	Lyndon_Harrison@xtoenergy.com	

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
217446	WELL	PR	10/01/1996	GW	071-06223	APACHE CANYON 20-1	PR

General Comment:

Location

Overall Good:

Signs/Marker:

Type	WELLHEAD		
Comment:			
Corrective Action:		Date:	
Type	TANK LABELS/PLACARDS		
Comment:			
Corrective Action:		Date:	

Emergency Contact Number:

Comment:	<input type="text"/>	
Corrective Action:	<input type="text"/>	Date: _____

Overall Good:

Spills:

Type	Area	Volume		

In Containment: No

Comment:

Multiple Spills and Releases?

Fencing/:

Type	PUMP JACK		
Comment:			
Corrective Action:		Date:	

Equipment:

Type	#		corrective date
Vertical Separator	# 1		
Comment:			
Corrective Action:		Date:	
Deadman # & Marked	# 4		
Comment:			
Corrective Action:		Date:	
Pump Jack	# 1		
Comment:			
Corrective Action:		Date:	
Gas Meter Run	# 1		
Comment:			
Corrective Action:		Date:	

Tanks and Berms:

Contents	#	Capacity	Type	Tank ID	SE GPS
PRODUCED WATER	1	<50 BBLs	STEEL AST		,
Comment:	1 - 15 bbl ST				

Corrective Action:	Date:
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Paint

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

Berms

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

Venting:

Yes/No			
Comment:			
Corrective Action:			Date:

Flaring:

Type			
Comment:			
Corrective Action:			Date:

Inspected Facilities

Facility ID: 217446 Type: WELL API Number: 071-06223 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