

FORM  
INSPRev  
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:

11/21/2017

Submitted Date:

11/22/2017

Document Number:

671000767

### FIELD INSPECTION FORM

Loc ID 307948 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: 600 E EXCHANGE AVE  
 City: FORTH WORTH State: TX Zip: 76164

**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	ediefitzgerald@tcenergy.us	<a href="#">All Inspections</a>
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
259817	WELL	PR	03/07/2010	GW	071-07297	HILL RANCH 16-04V	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: Deadman # & Marked	# 5				
Comment:					
Corrective Action:		Date:			
Type: Gas Meter Run	# 1				
Comment:					
Corrective Action:		Date:			
Type: Progressive Cavity	# 1				
Comment:					
Corrective Action:		Date:			
Type: Vertical Separator	# 1				
Comment:					
Corrective Action:		Date:			

**Venting:**

Yes/No			
Comment:			
Corrective Action:		Date:	

**Flaring:**

Type			
Comment:			
Corrective Action:		Date:	

**Inspected Facilities**

Facility ID: 259817 Type: WELL API Number: 071-07297 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: 60' x 50'

Corrective Action

Date:

Monitoring:	Monitoring Type	Comment
	Other	Blue stake