

**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:

11/21/2017

Submitted Date:

11/22/2017

Document Number:

671000769**FIELD INSPECTION FORM**

Loc ID 307949 Inspector Name: DURAN, JOHN On-Site Inspection ☐ 2A Doc Num: _____

Operator Information:OGCC Operator Number: 100264Name of Operator: XTO ENERGY INCAddress: 600 E EXCHANGE AVECity: FORTH WORTH State: TX Zip: 76164**Status Summary:**

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

Findings:4 Number of Comments0 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 | All Inspections |
| 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 |
|-------------|------|--------|-------------|------------|-----------|-------------------|-------------|
| 259818 | WELL | PR | 02/07/2010 | GW | 071-07298 | HILL RANCH 10-14V | PR |

General Comment:

LocationOverall 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?

| | | | |
|--------------------|-----------|-------|--|
| Fencing/: | | | |
| Type | PUMP JACK | | |
| Comment: | | | |
| Corrective Action: | | Date: | |

| | | | |
|--------------------------|-----|-------|-----------------|
| Equipment: | | | corrective date |
| Type: Gas Meter Run | # 1 | | |
| Comment: | | | |
| Corrective Action: | | Date: | |
| Type: Deadman # & Marked | # 5 | | |
| Comment: | | | |
| Corrective Action: | | Date: | |
| Type: Vertical Separator | # 1 | | |
| Comment: | | | |
| Corrective Action: | | Date: | |
| Type: Pump Jack | # 1 | | |
| Comment: | | | |
| Corrective Action: | | Date: | |

Venting:

| | | | |
|--------------------|--|-------|--|
| Yes/No | | | |
| Comment: | | | |
| Corrective Action: | | Date: | |

Flaring:

| | | |
|----------|--|--|
| Type | | |
| Comment: | | |

| | | | |
|--------------------|--|-------|--|
| Corrective Action: | | Date: | |
|--------------------|--|-------|--|

| | | | | |
|-----------------------------|------------|-----------------------|------------|------------------|
| Inspected Facilities | | | | |
| Facility ID: 259818 | Type: WELL | API Number: 071-07298 | 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 PITType: Produced WaterLined: NOPit 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: NO2+ feet Freeboard: YESComment: 40' x 60'Corrective Action: Date: Monitoring: Monitoring Type: Comment: Other:

Blue stake