

**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:

12/06/2017

Submitted Date:

12/12/2017

Document Number:

685304037**FIELD INSPECTION FORM**
 Loc ID 326370 Inspector Name: St John, William (Cal) 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:15 Number of Comments0 Number of Corrective Actions☐ Corrective Action Response Requested**Contact Information:**

Contact Name	Phone	Email	Comment
Beaty, Brent	505-330-3210	brent_beaty@xtoenergy.com	SW Inspection Reports
Trobaugh, Robert	505-333-3185	robert_trobaugh@xtoenergy.com	SW Inspection Reports
Woolley, Jeff	505-333-3222	Jeff_Woolley@xtoenergy.com	SW Inspection Reports

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
216323	WELL	PR	05/20/1993	GW	067-07929	SHIELDS 2-6	PR

General Comment:[Inspection completed as part of normal routine inspection requirement.](#)[This inspection does not alleviate requirement to complete any open corrective actions from previous inspections.](#)[See Link at end of report for path to downloadable pictures.](#)

Location

Lease Road:			
Type	Access		
comment:	Dirt and gravel access road.		
Corrective Action		Date:	

Overall Good: ☐

Signs/Marker:			
Type	WELLHEAD		
Comment:	Metal sign mounted to the gas meter run shed.		
Corrective Action:		Date:	

Emergency Contact Number:			
Comment:	Operator contact information posted on wellhead sign.		
Corrective Action:		Date:	

Good Housekeeping:			
Type	UNUSED EQUIPMENT		
Comment:	Identified (2) unused riser/flowlines. Lines are plugged/capped.		
Corrective Action:		Date:	

Overall Good: ☐

Spills:				
Type	Area	Volume		

In Containment: No

Comment: ☐ Multiple Spills and Releases?

Fencing/:			
Type	WELLHEAD		
Comment:	Stock panel fencing.		
Corrective Action:		Date:	

Equipment:			corrective date
Type: Plunger Lift	# 1		
Comment:			
Corrective Action:		Date:	
Type: Ancillary equipment	# 1		
Comment:	Wellhead.		
Corrective Action:		Date:	
Type: Ancillary equipment	# 1		
Comment:	Telemetry equipment.		
Corrective Action:		Date:	
Type: Deadman # & Marked	# 5		
Comment:			

Corrective Action:		Date:	
Type: Gas Meter Run	# 1		
Comment:			
Corrective Action:		Date:	
Type: Flow Line	# 4		
Comment:	In use - 4" steel line from wellhead tubing and casing to separator inlet. All points co-located. In use - 4" steel line from separator outlet to gas meter inlet. Unused - 4" steel riser at wellhead to separator riser. All points co-located Unused - 1" steel supply gas line from separator outlet to wellhead. All points co-located.		
Corrective Action:		Date:	
Type: Vertical Heated Separator	# 1		
Comment:			
Corrective Action:		Date:	

Venting:

Yes/No	NO		
Comment:			
Corrective Action:		Date:	

Flaring:

Type		
Comment:		
Corrective Action:		Date:

Inspected Facilities									
Facility ID:	216323	Type:	WELL	API Number:	067-07929	Status:	PR	Insp. Status:	PR
Producing Well									
Comment:	PR - Review of electronic well file indicates last reported production as Sep 2017.								
Corrective Action:								Date:	

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

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

Land Use: _____

Comment: [Location on level ground and surrounded by 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? _____

Comment _____

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	Compaction	Pass			
Gravel	Pass	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
685304055	Wellhead sign.	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4324367
685304056	Location overview.	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4324368