

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:

12/13/2017

Submitted Date:

12/19/2017

Document Number:

671000811**FIELD INSPECTION FORM**

Loc ID _____ Inspector Name: _____ On-Site Inspection
308464 _____ DURAN, JOHN _____ 2A Doc Num: _____

Status Summary:

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

Findings:

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

Operator Information:OGCC Operator Number: 100264Name of Operator: XTO ENERGY INCAddress: 600 E EXCHANGE AVECity: FORTH WORTH State: TX Zip: 76164**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
272459	WELL	PR	04/25/2010	GW	071-08079	HILL RANCH 17-05	PR

General Comment:

Location

Overall Good:

Signs/Marker:

	Type WELLHEAD		
Comment:			
Corrective Action:		Date:	

Emergency Contact Number:

Comment:	<input style="width: 95%;" type="text"/>		
Corrective Action:	<input style="width: 95%;" type="text"/>	Date:	<input style="width: 80%;" type="text"/>

Overall Good:

Spills:

Type	Area	Volume			

In Containment: No

Comment:

Multiple Spills and Releases?

Equipment:

					corrective date
Type: Vertical Separator	# 1				
Comment:					
Corrective Action:		Date:			
Type: Gas Meter Run	# 1				
Comment:					
Corrective Action:		Date:			
Type: Deadman # & Marked	# 5				
Comment:					
Corrective Action:		Date:			
Type: Progressive Cavity	# 1				
Comment:					
Corrective Action:		Date:			

Venting:

Yes/No			
Comment:			
Corrective Action:		Date:	

Flaring:

Type			
Comment:			
Corrective Action:		Date:	

Inspected Facilities

Facility ID: 272459 Type: WELL API Number: 071-08079 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: _____

Monitoring:	Monitoring Type	Comment
	Other	Blue stake