

**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:

06/29/2018

Submitted Date:

06/29/2018

Document Number:

691400646**FIELD INSPECTION FORM**
 Loc ID 307400 Inspector Name: Beardslee, Tom On-Site Inspection ☐ 2A Doc Num:                     
**Operator Information:**OGCC Operator Number: 10084Name of Operator: PIONEER NATURAL RESOURCES USA INCAddress: 5205 N O'CONNOR BLVD STE 200City: IRVING State: TX Zip: 75039**Status Summary:**☐ THIS IS A FOLLOW UP INSPECTION☒ FOLLOW UP INSPECTION REQUIRED☐ NO FOLLOW UP INSPECTION REQUIRED**Findings:**7 Number of Comments2 Number of Corrective Actions☒ Corrective Action Response Requested**Contact Information:**

Contact Name	Phone	Email	Comment
Gomez, Jason		jason.gomez@state.co.us	
Distribution, Pioneer	972-444-9001	COGCC.Inspections@pxd.co m	<a href="#">All Inspections</a>

**Inspected Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
217615	WELL	PR	05/29/1997	GW	071-06394	PCW 23-16	PR

**General Comment:**

**Location**Overall Good: ☒

<b>Signs/Marker:</b>			
Type	OTHER		
Comment:	Location sign adequate		
Corrective Action:		Date:	

Emergency Contact Number:			
Comment:			
Corrective Action:			Date: _____

<b>Good Housekeeping:</b>			
Type	UNUSED EQUIPMENT		
Comment:	Wellhead house stored on location not in use.		
Corrective Action:	Comply with Rule 603.f .		Date: 09/29/2018

Overall Good: ☐

<b>Spills:</b>				
Type	Area	Volume		

In Containment: No

Comment: ☐ Multiple Spills and Releases?

<b>Equipment:</b>			corrective date
Type: Gas Meter Run	# 1		
Comment:			
Corrective Action:			Date:
Type: Prime Mover	# 1		
Comment:			
Corrective Action:			Date:
Type: Deadman # & Marked	# 2		
Comment:			
Corrective Action:			Date:
Type: Plunger Lift	# 1		
Comment:	Hydraulic plunger lift leaking.		
Corrective Action:	Securely fasten all valves, pipes, and fittings to ensure good mechanical condition, inspect at regular intervals and maintain in good mechanical condition per Rule 605.d.		Date: 07/29/2018
Type: Ancillary equipment	# 1		
Comment:	Telemetry equipment.		
Corrective Action:			Date:

<b>Venting:</b>			
Yes/No	NO		
Comment:			

Corrective Action:		Date:	
<b>Flaring:</b>			
Type			
Comment:			
Corrective Action:		Date:	

Inspected Facilities									
Facility ID:	217615	Type:	WELL	API Number:	071-06394	Status:	PR	Insp. Status:	PR
Producing Well									
Comment:		PR							
Corrective Action:								Date:	
BradenHead									
Comment:		Not plumbed to surface							
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

Comment: 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
401690758	INSPECTION SUBMITTED	<a href="http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4511114">http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4511114</a>
691400647	LOC PICS	<a href="http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4511107">http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4511107</a>