

**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:

03/07/2019

Submitted Date:

03/07/2019

Document Number:

695100300

FIELD INSPECTION FORM

Loc ID 311963 Inspector Name: Beardslee, Tom On-Site Inspection ☐ 2A Doc Num: _____

Operator Information:

OGCC Operator Number: 10084

Name of Operator: PIONEER NATURAL RESOURCES USA INC

Address: 5205 N O'CONNOR BLVD STE 200

City: IRVING State: TX Zip: 75039

Status Summary:

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

Findings:

8 Number of Comments

4 Number of Corrective Actions

☒ Corrective Action Response Requested

**ANY CORRECTIVE ACTION(S) FROM
PREVIOUS INSPECTIONS THAT HAVE NOT
BEEN ADDRESSED ARE STILL APPLICABLE**

Contact Information:

Contact Name	Phone	Email	Comment
Distribution, Pioneer	972-444-9001	COGCC.Inspections@pxd.com	All Inspections
Distribution, Evergreen		cogcc.evergreen@enrllc.com	All Inspections

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
89167	WELL	TA	10/05/2016	GW	071-06746	VALDEZ 31-13 TR	TA
217450	WELL	PR	02/14/1997	GW	071-06227	VALDEZ 31-13	PR

General Comment:

LocationOverall Good: ☒

Signs/Marker:			
Type	OTHER		
Comment:	LOCATION SIGNS ON METER HOUSE		
Corrective Action:		Date:	

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

Good Housekeeping:			
Type	OTHER		
Comment:	IMPACTED SOIL AROUND COMPRESSOR. SEE LOCATION PHOTOS		
Corrective Action:	Comply with Rule 603.f .	Date:	04/07/2019
Type	TRASH		
Comment:	TRASH IN PIT. SEE LOCATION PHOTOS		
Corrective Action:	Comply with Rule 603.f .	Date:	03/19/2019
Type	UNUSED EQUIPMENT		
Comment:	UNMARKED UNUSED RISERS.		
Corrective Action:	Comply with Rule 603.f .	Date:	04/07/2019

Overall Good: ☐

Spills:				
Type	Area	Volume		

In Containment: No

Comment: ☐ Multiple Spills and Releases?

Equipment:			corrective date
Type:	#		
Comment:			
Corrective Action:		Date:	
Type: Compressor	# 1		
Comment:	WELL IS BEING PRODUCED WITH A COMPRESSOR AT WELLHEAD (PRODUCED ON A VACUUM) WITH NO FORM 4 SUNDRY NOTICE ON RECORD.		
Corrective Action:	COMPLY WITH RULE 331.	Date:	04/07/2019

Venting:			
Yes/No	NO		
Comment:			
Corrective Action:		Date:	

Flaring:			
Type			

Comment:			
Corrective Action:		Date:	

Inspected FacilitiesFacility ID: 89167 Type: WELL API Number: 071-06746 Status: TA Insp. Status: TA**Idle Well**Purpose: ☐ Shut In ☒ Temporarily Abandoned Reminder: _____Comment: LAST MIT APPROVED 6/16/14

Corrective Action: _____ Date: _____

Facility ID: 217450 Type: WELL API Number: 071-06227 Status: PR Insp. Status: PR**Producing Well**

Comment: _____

Corrective Action: _____ Date: _____

Attached DocumentsYou can go to COGCC Images (<https://cogcc.state.co.us/weblink/>) and search by document number:

Document Num	Description	URL
695100301	LOCATION PHOTOS	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4755954