

**FORM INSP**  
Rev 05/11

**State of Colorado**  
**Oil and Gas Conservation Commission**

1120 Lincoln Street, Suite 801, Denver, Colorado 80203 Phone: (303) 894-2100 Fax: (303) 894-2109



|    |    |    |    |
|----|----|----|----|
| DE | ET | OE | ES |
|----|----|----|----|

Inspection Date:  
07/05/2012

Document Number:  
668000382

Overall Inspection:  
Satisfactory

**FIELD INSPECTION FORM**

|                     |               |               |               |                    |
|---------------------|---------------|---------------|---------------|--------------------|
| Location Identifier | Facility ID   | Loc ID        | Tracking Type | Inspector Name:    |
|                     | <u>259735</u> | <u>307935</u> |               | <u>DURAN, JOHN</u> |

**Operator Information:**

OGCC Operator Number: 10084 Name of Operator: PIONEER NATURAL RESOURCES USA INC  
 Address: 1401 17TH ST STE 1200  
 City: DENVER State: CO Zip: 80202

**Contact Information:**

| Contact Name   | Phone                     | Email                  | Comment |
|----------------|---------------------------|------------------------|---------|
| GLINISTY, JUDY | 303-675-2658              | Judy.Glinisty @pxd.com |         |
| HISS, DUANE    | 719-845-4394/719-680-0024 | duane.hiss@ pxd.com    |         |

**Compliance Summary:**

QtrQtr: SWNE Sec: 17 Twp: 32S Range: 65W

| Insp. Date | Doc Num   | Insp. Type | Insp Status | Satisfactory /Unsatisfactory | PA P/F/I | Pas/Fail (P/F) | Violation (Y/N) |
|------------|-----------|------------|-------------|------------------------------|----------|----------------|-----------------|
| 03/25/2008 | 200129018 | PR         | PR          | S                            |          |                | N               |
| 01/05/2006 | 200082551 | PR         | PR          | S                            |          | P              | N               |
| 04/03/2003 | 200037224 | PR         | PR          | S                            |          | P              | N               |

**Inspector Comment:**

**Related Facilities:**

| Facility ID | Type | Status | Status Date | Well Class | API Num   | Facility Name   |                                     |
|-------------|------|--------|-------------|------------|-----------|-----------------|-------------------------------------|
| 259735      | WELL | PR     | 08/29/2001  | GW         | 071-07273 | NIKKIE 32-17    | <input checked="" type="checkbox"/> |
| 414985      | WELL | AL     | 01/25/2012  |            | 071-09776 | NIKKIE 32-17 TR | <input type="checkbox"/>            |

**Equipment:**

Location Inventory

|                                 |                         |                      |                           |
|---------------------------------|-------------------------|----------------------|---------------------------|
| Special Purpose Pits: _____     | Drilling Pits: <u>1</u> | Wells: <u>2</u>      | Production Pits: <u>2</u> |
| Condensate Tanks: _____         | Water Tanks: _____      | Separators: <u>2</u> | Electric Motors: _____    |
| Gas or Diesel Mortors: <u>2</u> | Cavity Pumps: <u>2</u>  | LACT Unit: _____     | Pump Jacks: _____         |
| Electric Generators: _____      | Gas Pipeline: <u>2</u>  | Oil Pipeline: _____  | Water Pipeline: <u>2</u>  |
| Gas Compressors: _____          | VOC Combustor: _____    | Oil Tanks: _____     | Dehydrator Units: _____   |
| Multi-Well Pits: _____          | Pigging Station: _____  | Flare: _____         | Fuel Tanks: _____         |

**Location**

**Signs/Marker:**

| Type     | Satisfactory/Unsatisfactory | Comment | Corrective Action | CA Date |
|----------|-----------------------------|---------|-------------------|---------|
| WELLHEAD | Satisfactory                |         |                   |         |

Inspector Name: DURAN, JOHN

Emergency Contact Number: (S/U/V) Satisfactory Corrective Date: \_\_\_\_\_

Comment: \_\_\_\_\_

Corrective Action: \_\_\_\_\_

**Spills:**

| Type | Area | Volume | Corrective action | CA Date |
|------|------|--------|-------------------|---------|
|------|------|--------|-------------------|---------|

Multiple Spills and Releases?

**Equipment:**

| Type               | # | Satisfactory/Unsatisfactory | Comment | Corrective Action | CA Date |
|--------------------|---|-----------------------------|---------|-------------------|---------|
| Progressive Cavity | 1 | Satisfactory                |         |                   |         |
| Gas Meter Run      | 1 | Satisfactory                |         |                   |         |
| Deadman # & Marked | 4 | Satisfactory                |         |                   |         |
| Vertical Separator | 1 | Satisfactory                |         |                   |         |

**Venting:**

| Yes/No | Comment |
|--------|---------|
|        |         |

**Flaring:**

| Type | Satisfactory/Unsatisfactory | Comment | Corrective Action | CA Date |
|------|-----------------------------|---------|-------------------|---------|
|      |                             |         |                   |         |

**Predrill**

Location ID: 307935

**Site Preparation:**

Lease Road Adeq.: \_\_\_\_\_ Pads: \_\_\_\_\_ Soil Stockpile: \_\_\_\_\_

Corrective Action: \_\_\_\_\_ Date: \_\_\_\_\_ CDP Num.: \_\_\_\_\_

**Form 2A COAs:**

| Group  | User    | Comment   | Date       |
|--------|---------|---|------------|
| Agency | walkerv | Location is in a sensitive area because of proximity to a domestic water well; therefore production pits must be lined                                  | 11/20/2009 |
| Agency | walkerv | Location is in a sensitive area because of proximity to a domestic water well; therefore either a lined drilling pit or closed loop system is required. | 11/20/2009 |

**Comment:** \_\_\_\_\_

**CA:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Wildlife BMPs:**

**Comment:** \_\_\_\_\_

**CA:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Stormwater:**

|              |         |            |         |
|--------------|---------|------------|---------|
| Erosion BMPs | Present | Other BMPs | Present |
|--------------|---------|------------|---------|

|  |  |                                      |                         |
|--|--|--------------------------------------|-------------------------|
|  |  |                                      |                         |
| Corrective Action: _____   |  | Date: _____                          |                         |
| Comments: Erosion BMPs: _____  |  |                                      |                         |
| Other BMPs: _____  |  |                                      |                         |
| <b>Comment:</b> _____  |  |                                      |                         |
| <b>Staking:</b> _____  |  |                                      |                         |
| <b>On Site Inspection (305):</b>   |  |                                      |                         |
| <u>Surface Owner Contact Information:</u>  |  |                                      |                         |
| Name: _____  |  | Address: _____                       |                         |
| Phone Number: _____  |  | Cell Phone: _____                    |                         |
| <u>Operator Rep. Contact Information:</u>  |  |                                      |                         |
| Landman Name: _____  |  | Phone Number: _____                  |                         |
| Date Onsite Request Received: _____  |  | Date of Rule 306 Consultation: _____ |                         |
| Request LGD Attendance: _____  |  |                                      |                         |
| <u>LGD Contact Information:</u>  |  |                                      |                         |
| Name: _____  |  | Phone Number: _____                  | Agreed to Attend: _____ |
| <u>Summary of Landowner Issues:</u>  |  |                                      |                         |
|  |  |                                      |                         |
| <u>Summary of Operator Response to Landowner Issues:</u>                                 |  |                                      |                         |
|  |  |                                      |                         |
| <u>Onsite Inspection Memorandum Summarizing Discussions at Inspection as Attachment:</u> |  |                                      |                         |
|  |  |                                      |                         |

| Facility            |            |                       |            |                  |
|---------------------|------------|-----------------------|------------|------------------|
| Facility ID: 259735 | Type: WELL | API Number: 071-07273 | Status: PR | Insp. Status: PR |

| Producing Well |  |
|----------------|--|
| Comment:       |  |

| Environmental |  |
|---------------|--|
|---------------|--|

|                                   |                              |                               |
|-----------------------------------|------------------------------|-------------------------------|
| <b>Spills/Releases:</b>           |                              |                               |
| Type of Spill: _____              | Description: _____           | Estimated Spill Volume: _____ |
| Comment: _____                    |                              |                               |
| Corrective Action: _____          |                              | Date: _____                   |
| Reportable: _____                 | GPS: Lat _____               | Long _____                    |
| Proximity to Surface Water: _____ | Depth to Ground Water: _____ |                               |

|                        |                   |             |
|------------------------|-------------------|-------------|
| <b>Water Well:</b>     |                   |             |
| DWR Receipt Num: _____ | Owner Name: _____ | GPS : _____ |
|                        |                   | Lat _____   |
|                        |                   | Long _____  |

|                          |
|--------------------------|
| <b>Field Parameters:</b> |
|                          |
| Sample Location: _____   |
|                          |

|                                      |
|--------------------------------------|
| Emission Control Burner (ECB): _____ |
|--------------------------------------|

Comment: \_\_\_\_\_

Pilot: \_\_\_\_\_ Wildlife Protection Devices (fired vessels): \_\_\_\_\_

**Reclamation - Storm Water - Pit**

**Interim Reclamation:**

Date Interim Reclamation Started: \_\_\_\_\_ Date Interim Reclamation Completed: \_\_\_\_\_

Land Use: TIMBER

Comment: \_\_\_\_\_

1003a. Debris removed? \_\_\_\_\_ CM \_\_\_\_\_

CA \_\_\_\_\_ CA Date \_\_\_\_\_

Waste Material Onsite? \_\_\_\_\_ CM \_\_\_\_\_

CA \_\_\_\_\_ CA Date \_\_\_\_\_

Unused or unneeded equipment onsite? \_\_\_\_\_ CM \_\_\_\_\_

CA \_\_\_\_\_ CA Date \_\_\_\_\_

Pit, cellars, rat holes and other bores closed? \_\_\_\_\_ CM \_\_\_\_\_

CA \_\_\_\_\_ CA Date \_\_\_\_\_

Guy line anchors removed? \_\_\_\_\_ CM \_\_\_\_\_

CA \_\_\_\_\_ CA Date \_\_\_\_\_

Guy line anchors marked? \_\_\_\_\_ CM \_\_\_\_\_

CA \_\_\_\_\_ CA 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 REVEGETATION**

Cropland

Top soil replaced \_\_\_\_\_ Recontoured \_\_\_\_\_ Perennial forage re-established \_\_\_\_\_

Non-Cropland

Top soil replaced \_\_\_\_\_ Recontoured \_\_\_\_\_ 80% Revegetation \_\_\_\_\_

1003 f. Weeds Noxious weeds? \_\_\_\_\_

Comment: \_\_\_\_\_

Overall Interim Reclamation \_\_\_\_\_

**Final Reclamation/ Abandoned Location:**

Date Final Reclamation Started: \_\_\_\_\_ Date Final Reclamation Completed: \_\_\_\_\_

Final Land Use: TIMBER

Reminder: \_\_\_\_\_

Comment: \_\_\_\_\_

Well plugged \_\_\_\_\_ Pit mouse/rat holes, cellars backfilled \_\_\_\_\_

Inspector Name: DURAN, JOHN

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 \_\_\_\_\_  
 Comment: \_\_\_\_\_  
 Corrective Action: \_\_\_\_\_ Date \_\_\_\_\_

Overall Final Reclamation

**Storm Water:**

| Loc Erosion BMPs | BMP Maintenance | Lease Road Erosion BMPs | Lease BMP Maintenance | Chemical BMPs | Chemical BMP Maintenance | Comment |
|------------------|-----------------|-------------------------|-----------------------|---------------|--------------------------|---------|
|                  |                 |                         |                       |               |                          |         |

S/U/V: \_\_\_\_\_ Corrective Date: \_\_\_\_\_  
 Comment: \_\_\_\_\_  
 CA: \_\_\_\_\_

**Pits:**

Pit Type: Produced Water Lined: NO Pit ID: \_\_\_\_\_ Lat: \_\_\_\_\_ Long: \_\_\_\_\_  
**Lining:**  
 Liner Type: \_\_\_\_\_ Liner Condition: \_\_\_\_\_  
 Comment: \_\_\_\_\_  
**Fencing:**  
 Fencing Type: \_\_\_\_\_ Fencing Condition: \_\_\_\_\_  
 Comment: \_\_\_\_\_  
**Netting:**  
 Netting Type: \_\_\_\_\_ Netting Condition: \_\_\_\_\_  
 Comment: \_\_\_\_\_  
 Anchor Trench Present: \_\_\_\_\_ Oil Accumulation: NO 2+ feet Freeboard: \_\_\_\_\_  
 Pit (S/U/V): Satisfactory Comment: 30' X 70'  
 Corrective Action: \_\_\_\_\_ Date: \_\_\_\_\_

| Monitoring: | Monitoring Type | Comment |
|-------------|-----------------|---------|
|             | Chain           |         |