

**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



| | | | |
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| DE | ET | OE | ES |
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Inspection Date:

07/31/2012

Document Number:

668000485

Overall Inspection:

Satisfactory**FIELD INSPECTION FORM**

| | | | | |
|---------------------|---------------|---------------|---------------|--------------------|
| Location Identifier | Facility ID | Loc ID | Tracking Type | Inspector Name: |
| | <u>217837</u> | <u>307565</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: NWNE | | Sec: 10 | Twp: 33S | | Range: 65W | | |
| Insp. Date | Doc Num | Insp. Type | Insp Status | Satisfactory /Unsatisfactory | PA P/F/I | Pas/Fail (P/F) | Violation (Y/N) |
| 03/16/2009 | 200206300 | PR | PR | S | | | N |
| 12/29/2005 | 200082080 | PR | PR | S | | P | N |
| 03/31/2003 | 200037049 | PR | PR | S | | P | N |
| 09/24/2001 | 1067158 | PR | PR | S | | P | N |
| 09/30/1999 | 500152056 | PR | PR | | | P | N |
| 09/04/1998 | 500152055 | DG | WO | | | P | N |

Inspector Comment:**Related Facilities:**

| Facility ID | Type | Status | Status Date | Well Class | API Num | Facility Name | |
|-------------|------|--------|-------------|------------|-----------|---------------------|-------------------------------------|
| 217837 | WELL | PR | 10/26/2003 | GW | 071-06616 | PHELPS CANYON 31-10 | <input checked="" type="checkbox"/> |

Equipment:**Location Inventory**

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

Location

Inspector Name: DURAN, JOHN

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

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

Comment: _____

Corrective Action: _____

| | | | | |
|--|------|--------|-------------------|---------|
| Spills: | | | | |
| Type | Area | Volume | Corrective action | CA Date |
| <input type="checkbox"/> Multiple Spills and Releases? | | | | |

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

| | | | |
|-----------------|---------|--|--|
| Venting: | | | |
| Yes/No | Comment | | |
| | | | |

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

Predrill

Location ID: 307565

Site Preparation:

Lease Road Adeq.: _____

Pads: _____

Soil Stockpile: _____

Corrective Action: _____

Date: _____ CDP Num.: _____

Form 2A COAs:**Comment:****CA:****Date:****Wildlife BMPs:****Comment:****CA:****Date:****Stormwater:**

Erosion BMPs

Present

Other BMPs

Present

Corrective Action: _____ Date: _____

Comments: Erosion BMPs: _____

Other BMPs: _____

Comment:**Staking:****On Site Inspection (305):****Surface Owner Contact Information:**

Name: _____

Address: _____

Phone Number: _____

Cell Phone: _____

Operator Rep. Contact Information:

Landman Name: _____

Phone Number: _____

Date Onsite Request Received: _____

Date of Rule 306 Consultation: _____

Request LGD Attendance: _____

LGD Contact Information:

Name: _____ Phone Number: _____ Agreed to Attend: _____

Summary of Landowner Issues:**Summary of Operator Response to Landowner Issues:****Onsite Inspection Memorandum Summarizing Discussions at Inspection as Attachment:****Facility**

Facility ID: 217837 Type: WELL API Number: 071-06616 Status: PR Insp. Status: PR

Producing Well**Comment:****Environmental****Spills/Releases:**

Inspector Name: DURAN, JOHN

| | | |
|--|------------------------------|-------------------------------|
| Type of Spill: _____ | Description: _____ | Estimated Spill Volume: _____ |
| Comment: <div style="border: 1px solid black; height: 20px; width: 100%;"></div> | | |
| Corrective Action: _____ | | Date: _____ |
| Reportable: _____ | GPS: Lat _____ | Long _____ |
| Proximity to Surface Water: _____ | Depth to Ground Water: _____ | |

| | | | |
|------------------------|-------------------|-------------|------------|
| Water Well: | | Lat _____ | Long _____ |
| DWR Receipt Num: _____ | Owner Name: _____ | GPS : _____ | |

Field Parameters:

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: _____ | |
| Comment: <div style="border: 1px solid black; height: 20px; width: 100%;"></div> | |
| 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 | |
| <u>Cropland</u> | |

Inspector Name: DURAN, JOHN

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: _____

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 _____

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:

Inspector Name: DURAN, JOHN

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 80'

Corrective Action: _____ Date: _____