

**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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Inspection Date:

11/27/2012

Document Number:

663800605

Overall Inspection:

Satisfactory**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Tracking Type	Inspector Name:
	<u>294526</u>	<u>334813</u>		<u>LONGWORTH, MIKE</u>

Operator Information:OGCC Operator Number: 96850 Name of Operator: WPX ENERGY ROCKY MOUNTAIN LLCAddress: 1001 17TH STREET - SUITE #1200City: DENVER State: CO Zip: 80202**Contact Information:****Compliance Summary:**QtrQtr: NESW Sec: 4 Twp: 7S Range: 95W

Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Unsatisfactory	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
02/25/2010	200232578	PR	UN	U			Y

Inspector Comment:**Related Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	
210929	WELL	PR	06/15/1998	GW	045-06687	SAVAGE GV 80-4	X
294526	WELL	DG	10/21/2012	LO	045-15509	Savage PA 524-4	X
294527	WELL	PR	02/28/2010	GW	045-15510	SAVAGE PA 523-4	X
294528	WELL	PR	02/28/2010	GW	045-15511	SAVAGE PA513-4	X
294529	WELL	PR	02/28/2010	GW	045-15512	SAVAGE PA 414-4	X
299742	WELL	DG	11/05/2012	LO	045-17746	Savage PA 324-4	X
299743	WELL	PR	02/28/2010	GW	045-17747	SAVAGE PA 14-4	X
299744	WELL	PR	02/28/2010	GW	045-17748	SAVAGE PA 24-4	X
419921	WELL	XX	10/21/2010	LO	045-20058	Savage PA 44-5	X
419922	WELL	XX	10/21/2010	LO	045-20059	Savage PA 443-5	X
419925	WELL	XX	10/21/2010	LO	045-20061	Savage PA 444-5	X
419936	WELL	XX	10/21/2010	LO	045-20064	Savage PA 13-4	X
419941	WELL	XX	10/21/2010	LO	045-20066	Savage PA 423-4	X
419972	WELL	DG	10/28/2012		045-20075	Savage PA 514-4	X
419975	WELL	XX	10/21/2010	LO	045-20077	Savage PA 413-4	X
419979	WELL	XX	10/21/2010	LO	045-20080	Savage PA 323-4	X
419989	WELL	DG	10/14/2012		045-20083	Savage PA 424-4	X
419994	WELL	XX	10/21/2010	LO	045-20085	Savage PA 313-4	X
419995	WELL	XX	10/21/2010	LO	045-20086	Savage PA 344-5	X
420005	WELL	DG	11/12/2012	LO	045-20090	Savage PA 314-4	X
420012	WELL	XX	10/21/2010	LO	045-20092	Savage PA 43-5	X

Inspector Name: LONGWORTH, MIKE

420095	WELL	XX	10/28/2010	LO	045-20099	Savage PA 343-5	<input checked="" type="checkbox"/>
420096	WELL	DG	11/19/2012	LO	045-20100	Savage PA 544-5	<input checked="" type="checkbox"/>

Equipment:Location Inventory

Special Purpose Pits: 1	Drilling Pits: _____	Wells: 23	Production Pits: _____
Condensate Tanks: 3	Water Tanks: 3	Separators: 23	Electric Motors: _____
Gas or Diesel Motors: _____	Cavity Pumps: _____	LACT Unit: _____	Pump Jacks: _____
Electric Generators: _____	Gas Pipeline: 2	Oil Pipeline: _____	Water Pipeline: 1
Gas Compressors: _____	VOC Combustor: _____	Oil Tanks: _____	Dehydrator Units: _____
Multi-Well Pits: _____	Pigging Station: _____	Flare: _____	Fuel Tanks: _____

Location

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

Comment: _____

Corrective Action: _____

Spills:

Type	Area	Volume	Corrective action	CA Date
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☐ Multiple Spills and Releases?**Venting:**

Yes/No	Comment

Flaring:

Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date

Predrill

Location ID: 334813

Site Preparation:

Lease Road Adeq.: _____ Pads: _____ Soil Stockpile: _____

Corrective Action: _____ Date: _____ CDP Num.: _____

Form 2A COAs:

Group	User	Comment	Date
OGLA	kubeczkod	The moisture content of any drill cuttings in a cuttings pit, trench, or pile shall be as low as practicable to prevent accumulation of liquids greater than de minimis amounts. At the time of closure, the drill cuttings must also meet the applicable standards of table 910-1.	09/20/2010
OGLA	kubeczkod	Reserve pit must be lined or closed loop system (which Williams has already indicated on the Form 2A) must be implemented during drilling.	09/20/2010
OGLA	kubeczkod	Operator must implement best management practices to contain any unintentional release of fluids.	09/20/2010

OGLA	kubeczkod	Location is in a sensitive area because of proximity to surface water; therefore, operator must ensure 110 percent secondary containment for any volume of fluids contained at well site during drilling and completion operations; including, but not limited to, construction of a berm or diversion dike, diversion/collection trenches within and/or outside of berms/dikes, site grading, or other comparable measures sufficiently protective of nearby surface water. If fluids are conveyed via pipeline, operator must implement best management practices to contain any unintentional release of fluids.	09/20/2010
OGLA	kubeczkod	No portion of any pit that will be used to hold liquids shall be constructed on fill material, unless the pit and fill slope are designed and certified by a professional engineer, subject to review and approval by the director prior to construction of the pit. The construction and lining of the pit shall be supervised by a professional engineer or their agent. The entire base of the pit must be in cut.	09/20/2010

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: 210929 Type: WELL API Number: 045-06687 Status: PR Insp. Status: PR

Producing WellComment:

Facility ID: 294526 Type: WELL API Number: 045-15509 Status: DG Insp. Status: DG

CementCement ContractorContractor Name: Contractor Phone: Surface CasingCement Volume (sx): Circulate to Surface: Cement Fall Back: Top Job, 1" Volume: Intermediate CasingCement Volume (sxs): Good Return During Job: Production CasingCement Volume (sx): Good Return During Job: Plugging OperationsDepth Plugs(feet range): Cement Volume (sx): Good Return During Job: Cement Type: Comment:

Facility ID: 294527 Type: WELL API Number: 045-15510 Status: PR Insp. Status: PR

Producing WellComment:

Facility ID: 294528 Type: WELL API Number: 045-15511 Status: PR Insp. Status: PR

Producing WellComment:

Facility ID: 294529 Type: WELL API Number: 045-15512 Status: PR Insp. Status: PR

Producing WellComment:

Facility ID: 299742 Type: WELL API Number: 045-17746 Status: DG Insp. Status: DG

Well Drilling

Rig: Rig Name: N577 Pusher/Rig Manager: RON TOWERS
 Permit Posted: _____ Access Sign: _____

Well Control Equipment:

Pipe Ram: _____ Blind Ram: _____ Hydril Type: _____
 Pressure Test BOP: _____ Test Pressure PSI: _____ Safety Plan: _____

Drill Fluids**Management:**

Lined Pit: _____ Unlined Pit: _____ Closed Loop: _____ Semi-Closed Loop: _____
 Multi-Well: _____ Disposal Location: _____

Comment:

Facility ID: 299743 Type: WELL API Number: 045-17747 Status: PR Insp. Status: PR

Producing Well

Comment: _____

Facility ID: 299744 Type: WELL API Number: 045-17748 Status: PR Insp. Status: PR

Producing Well

Comment: _____

Facility ID: 419921 Type: WELL API Number: 045-20058 Status: XX Insp. Status: ND

Facility ID: 419922 Type: WELL API Number: 045-20059 Status: XX Insp. Status: ND

Facility ID: 419925 Type: WELL API Number: 045-20061 Status: XX Insp. Status: DG

Well Drilling

Rig: Rig Name: Nabors 577 Pusher/Rig Manager: Ron Towers
 Permit Posted: Satisfactory Access Sign: Satisfactory

Well Control Equipment:

Pipe Ram: _____ Blind Ram: _____ Hydril Type: _____
 Pressure Test BOP: Pass Test Pressure PSI: _____ Safety Plan: _____

Drill Fluids**Management:**

Lined Pit: _____ Unlined Pit: YES Closed Loop: _____ Semi-Closed Loop: YES
 Multi-Well: YES Disposal Location: _____

Comment:

Cement**Cement Contractor**Contractor Name: HalliburtonContractor Phone: 970-523-3600**Surface Casing**Cement Volume (sx): 335Circulate to Surface: YESCement Fall Back: NO

Top Job, 1" Volume: _____

Intermediate Casing

Cement Volume (sxs): _____

Good Return During Job: _____

Production Casing

Cement Volume (sx): _____

Good Return During Job: _____

Plugging Operations

Depth Plugs(feet range): _____

Cement Volume (sx): _____

Good Return During Job: YES

Cement Type: _____

Comment: 175 sacks lead and 160 sacks tail 40bbls returnsFacility ID: 419936 Type: WELL API Number: 045-20064 Status: XX Insp. Status: NDFacility ID: 419941 Type: WELL API Number: 045-20066 Status: XX Insp. Status: NDFacility ID: 419972 Type: WELL API Number: 045-20075 Status: DG Insp. Status: DG**Well Drilling****Rig:** Rig Name: NABORS 577Pusher/Rig Manager: RON TOWERS

Permit Posted: _____

Access Sign: Satisfactory**Well Control Equipment:**

Pipe Ram: _____

Blind Ram: _____

Hydril Type: _____

Pressure Test BOP: _____

Test Pressure PSI: _____

Safety Plan: _____

Drill Fluids**Management:**

Lined Pit: _____

Unlined Pit: _____

Closed Loop: _____

Semi-Closed Loop: _____

Multi-Well: _____

Disposal Location: _____

Comment:Facility ID: 419975 Type: WELL API Number: 045-20077 Status: XX Insp. Status: NDFacility ID: 419979 Type: WELL API Number: 045-20080 Status: XX Insp. Status: NDFacility ID: 419989 Type: WELL API Number: 045-20083 Status: DG Insp. Status: DG

Well Drilling

Rig: Rig Name: NABORS 577 Pusher/Rig Manager: RON TOWERS
 Permit Posted: _____ Access Sign: Satisfactory

Well Control Equipment:

Pipe Ram: _____ Blind Ram: _____ Hydril Type: _____
 Pressure Test BOP: _____ Test Pressure PSI: _____ Safety Plan: _____

Drill Fluids Management:

Lined Pit: _____ Unlined Pit: _____ Closed Loop: _____ Semi-Closed Loop: _____
 Multi-Well: YES Disposal Location: _____

Comment:

Facility ID: 419994 Type: WELL API Number: 045-20085 Status: XX Insp. Status: ND

Facility ID: 419995 Type: WELL API Number: 045-20086 Status: XX Insp. Status: ND

Facility ID: 420005 Type: WELL API Number: 045-20090 Status: DG Insp. Status: DG

Well Drilling

Rig: Rig Name: NABORS 577 Pusher/Rig Manager: RON TOWERS
 Permit Posted: _____ Access Sign: Satisfactory

Well Control Equipment:

Pipe Ram: _____ Blind Ram: _____ Hydril Type: _____
 Pressure Test BOP: _____ Test Pressure PSI: _____ Safety Plan: _____

Drill Fluids Management:

Lined Pit: _____ Unlined Pit: YES Closed Loop: _____ Semi-Closed Loop: _____
 Multi-Well: YES Disposal Location: _____

Comment:

Facility ID: 420012 Type: WELL API Number: 045-20092 Status: XX Insp. Status: ND

Facility ID: 420095 Type: WELL API Number: 045-20099 Status: XX Insp. Status: ND

Facility ID: 420096 Type: WELL API Number: 045-20100 Status: DG Insp. Status: DG

Well Drilling

Rig: Rig Name: NABORS 577 Pusher/Rig Manager: RON TOWERS
 Permit Posted: _____ Access Sign: Satisfactory

Well Control Equipment:

Pipe Ram: _____ Blind Ram: _____ Hydril Type: _____
 Pressure Test BOP: _____ Test Pressure PSI: _____ Safety Plan: _____

Drill Fluids Management:

Lined Pit: _____ Unlined Pit: YES Closed Loop: _____ Semi-Closed Loop: _____
 Multi-Well: YES Disposal Location: _____

Comment:

Environmental**Spills/Releases:**

Type of Spill: _____ Description: _____ Estimated Spill Volume: _____
 Comment: _____
 Corrective Action: _____ Date: _____
 Reportable: _____ GPS: Lat _____ Long _____
 Proximity to Surface Water: _____ Depth to Ground Water: _____

Water Well:

DWR Receipt Num: _____ Owner Name: _____ GPS : _____ Lat _____ Long _____

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: DRY LAND, HAY MEADOW, OTHER

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 _____

Inspector Name: LONGWORTH, MIKE

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: DRY LAND, HAY MEADOW, OTHER _____

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 _____ Multi-Well Location ☐

Storm Water:

Loc Erosion BMPs	BMP Maintenance	Lease Road Erosion BMPs	Lease BMP Maintenance	Chemical BMPs	Chemical BMP Maintenance	Comment
		Gravel	Pass			
Gravel	Pass	Ditches	Pass			

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Compaction	Pass	Compaction	Pass			
Ditches	Pass	Culverts	Pass			
Berms	Pass	Berms	Pass			

S/U/V: Satisfactory Corrective Date: _____

Comment: _____

CA: _____

Pits:

Pit Type: _____ Lined: _____ 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: _____ 2+ feet Freeboard: _____

Pit (S/U/V): _____ Comment: _____

Corrective Action: _____ Date: _____