

Inspector Name: HICKEY, MIKE

**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:

03/25/2013

Document Number:

667601241

Overall Inspection:

Satisfactory**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	<u>431907</u>	<u>431829</u>	<u>HICKEY, MIKE</u>	<input type="checkbox"/>	

Operator Information:OGCC Operator Number: 100185 Name of Operator: ENCANA OIL & GAS (USA) INCAddress: 370 17TH ST STE 1700City: DENVERState: COZip: 80202-**Contact Information:**

Contact Name	Phone	Email	Comment
Berlin, John		john.berlin@encana.com	

Compliance Summary:QtrQtr: SENE Sec: 16 Twp: 3N Range: 68W**Inspector Comment:**

Drilling inspection of API #05-123-36854, State #1H-16H. Drilling out from surface cement. Calcium carbonate bags at the hopper house were uncovered. Driller dispatched derrick hand to cover them. Fresh water tank requires secondary containment. Company man is aware and planning compliance. Doghouse Form 2 was for the first well in the series; drilling on #7 now. Company man printed current permit before I left and will post it in the doghouse.

Related Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	
431830	WELL	XX	02/15/2013		123-36805	State 1-16	<input type="checkbox"/>
431904	WELL	DG	03/19/2013		123-36851	State 1E-16H	<input checked="" type="checkbox"/>
431905	WELL	DG	03/20/2013		123-36852	State 1F-16H	<input checked="" type="checkbox"/>
431906	WELL	DG	03/18/2013		123-36853	State 1D-16H	<input checked="" type="checkbox"/>
431907	WELL	DG	03/22/2013		123-36854	State 1H-16H	<input checked="" type="checkbox"/>
431908	WELL	DG	03/15/2013		123-36855	State 1B-16H	<input checked="" type="checkbox"/>
431909	WELL	DG	03/16/2013		123-36856	State 1C-16H	<input checked="" type="checkbox"/>
431910	WELL	DG	03/21/2013		123-36857	State 1G-16H	<input checked="" type="checkbox"/>

Equipment:Location Inventory

Special Purpose Pits: _____	Drilling Pits: _____	Wells: <u>8</u>	Production Pits: _____
Condensate Tanks: _____	Water Tanks: <u>15</u>	Separators: <u>8</u>	Electric Motors: _____
Gas or Diesel Mortors: _____	Cavity Pumps: _____	LACT Unit: _____	Pump Jacks: _____
Electric Generators: _____	Gas Pipeline: _____	Oil Pipeline: _____	Water Pipeline: _____
Gas Compressors: _____	VOC Combustor: <u>15</u>	Oil Tanks: <u>29</u>	Dehydrator Units: _____
Multi-Well Pits: _____	Pigging Station: _____	Flare: _____	Fuel Tanks: _____

Location

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Signs/Marker:				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
DRILLING/RECOMP	Satisfactory			

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

Comment: _____

Corrective Action: _____

Good Housekeeping:				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
STORAGE OF SUPL	Unsatisfactory	Uncovered CaCl bags at the hopper house. All other bags are well covered.	Cover all drilling fluid additives at all times.	03/26/2013

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

Fencing:				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
LOCATION	Satisfactory	30' sound wall.		

Venting:				
Yes/No	Comment			
NO				

Flaring:				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date

Predrill

Location ID: 431829

Site Preparation:

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

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

Form 2A COAs:

Group	User	Comment	Date
OGLA	deranleg	<p>1.Operator shall apply an appropriate liquid dust suppressant and dust control in advance of and during--as necessary--mobilization, construction, water hauling, or other high traffic periods to the gravel portions of the haul route and access road (s). Such application shall not be done in violation of Colorado Department of Transportation, Weld County, or Town of Mead, or any other regulatory authority, as applicable. If authorized by surface owner, operator may install a suitable hard or semi-hard surface on access roads and permanent pad to prevent dust generation.</p> <p>2.Operator shall not schedule rig or major equipment mobilization or high volume fluids hauling on Thanksgiving Day, the day after Thanksgiving, the day before Christmas, or Christmas Day.</p> <p>3.Operator shall install fencing adequate to prevent unauthorized public access around all wellheads and production facilities prior to putting equipment into service.</p> <p>4.Operator shall orient drilling rig and completion equipment such that noise is minimized toward the residences to the southeast and the school to the north.</p> <p>5.Operator shall install temporary sound mitigation to further reduce drilling and completion noise disturbance to the residents to the southeast and school to the north. This COA shall not preclude additional sound mitigation, if necessary and appropriate.</p> <p>6.Operator shall prepare and submit to COGCC as-built drawings showing production facilities and pipelines (generally), within 90 days of installation.</p>	02/14/2013

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:

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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: 431904 Type: WELL API Number: 123-36851 Status: DG Insp. Status: IO

Cement

Cement Contractor

Contractor Name: _____

Contractor Phone: _____

Surface Casing

Cement Volume (sx): _____

Circulate to Surface: _____

Cement Fall Back: _____

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: _____

Cement Type: _____

Comment: _____

Idle Well

Purpose: ☒ Shut In ☐ Temporarily Abandoned Reminder: _____

S/V: Satisfactory CA Date: _____

CA: _____

Comment: _____

Facility ID: 431905 Type: WELL API Number: 123-36852 Status: DG Insp. Status: IO

Idle Well

Purpose: ☒ Shut In ☐ Temporarily Abandoned Reminder: _____

S/V: Satisfactory CA Date: _____

CA: _____

Comment: _____

Facility ID: 431906 Type: WELL API Number: 123-36853 Status: DG Insp. Status: IO

Idle Well

Purpose: ☒ Shut In ☐ Temporarily Abandoned Reminder: _____
 S/V: Satisfactory CA Date: _____
 CA: _____
 Comment: _____

Facility ID: 431907 Type: WELL API Number: 123-36854 Status: DG Insp. Status: IO

Idle Well

Purpose: ☒ Shut In ☐ Temporarily Abandoned Reminder: _____
 S/V: Satisfactory CA Date: _____
 CA: _____
 Comment: _____

Facility ID: 431908 Type: WELL API Number: 123-36855 Status: DG Insp. Status: IO

Idle Well

Purpose: ☒ Shut In ☐ Temporarily Abandoned Reminder: _____
 S/V: Satisfactory CA Date: _____
 CA: _____
 Comment: _____

Facility ID: 431909 Type: WELL API Number: 123-36856 Status: DG Insp. Status: IO

Idle Well

Purpose: ☒ Shut In ☐ Temporarily Abandoned Reminder: _____
 S/V: Satisfactory CA Date: _____
 CA: _____
 Comment: _____

Facility ID: 431910 Type: WELL API Number: 123-36857 Status: DG Insp. Status: DG

Well Drilling

Rig: Rig Name: H&P #287 Pusher/Rig Manager: Kevin
 Permit Posted: Unsatisfactory Access Sign: Satisfactory

Well Control Equipment:

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

Drill Fluids Management:

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

Comment:**Environmental****Spills/Releases:**

Type of Spill: _____ Description: _____ Estimated Spill Volume: _____
 Comment: _____

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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: IRRIGATED

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

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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: IRRIGATED

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

S/U/V: _____ Corrective Date: _____

Comment: _____

CA: _____