



State of Colorado Oil and Gas Conservation Commission

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



FOR OGCC USE ONLY

ACCIDENT REPORT

As required by Rule 602.b.

Report taken by:

DESCRIPTION OF ACCIDENT (Please be as specific as possible)

Name of Operator: <u>WPX Energy Rocky Mountain LLC</u>	Location
Date of Incident: <u>August 2, 2013</u>	County: <u>Garfield</u>
Type of Facility (well, tank battery, flow line, pit): <u>Well</u>	Field Name: <u>Grand Valley</u>
Well Name and Number: <u>GM 702-4-HN-1</u>	QtrQtr: <u>SW NE</u> Section: <u>4</u>
API Number: <u>05 045 22051</u>	Township: <u>7 South</u> Range: <u>96 West</u>
Connect to Accident (land owner, royalty owner, etc.): <u>Operator</u>	Meridian: <u>6th PM</u>

Provide a detailed description of the accident, problem, and cause (equipment failure, human error, etc.):

A drilling contractor was checking the manufacturer specification plate on a compressor and had his right hand slip from the relay switch box and knock off the protective cover. His right hand then contacted the exposed wiring causing small electrical burns to the palm, thumb and right index finger. The injured contractor was seen by a physician and prescribed antibiotic to prevent infection. There is no lost time or modified duty associated with the injury. The incident occurred at 10:20 AM on August 2nd, 2013. Shaun Kellerby with the COGCC was notified of the incident by e-mail on August 3rd, 2013 at 8:07 AM.

OTHER NOTIFICATIONS

List the parties and agencies notified (County, BLM, EPA, DOT, Local Emergency Planning Coordinator or other).

Date	Agency	Contact Person	Response

Accident Tracking No: _____