

**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:

08/16/2013

Document Number:

663901497

Overall Inspection:

Satisfactory**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	<u>335915</u>	<u>335915</u>	<u>LONGWORTH, MIKE</u>	<input type="checkbox"/>	

Operator Information:OGCC Operator Number: 96850 Name of Operator: WPX ENERGY ROCKY MOUNTAIN LLCAddress: 1001 17TH STREET - SUITE #1200City: DENVERState: COZip: 80202**Contact Information:**

Contact Name	Phone	Email	Comment
KELLERBY, SHAUN		shaun.kellerby@state.co.us	
Moss, Brad	(970) 285-9377	Brad.Moss@WPXEnergy.com	Production foreman
Gardner, Michael	970/285-9377 ext. 2760	Michael.Gardner@WPXEnergy.com	Principal Environmental Specialist

Compliance Summary:QtrQtr: NENE Sec: 32 Twp: 5S Range: 97W**Inspector Comment:****Related Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	
277263	WELL	PR	01/01/2006	GW	045-10654	CHEVRON TR 41-32-597	<input checked="" type="checkbox"/>
296959	WELL	PR	01/07/2009	GW	045-16236	CHEVRON TR331-32-597	<input checked="" type="checkbox"/>
296960	WELL	PR	07/08/2008	GW	045-16237	CHEVRON TR511-33-597	<input checked="" type="checkbox"/>
296961	WELL	PR	12/29/2008	GW	045-16238	CHEVRON TR 411-33-597	<input checked="" type="checkbox"/>
296962	WELL	PR	04/01/2012	GW	045-16239	CHEVRON TR 11-33-597	<input checked="" type="checkbox"/>
296965	WELL	PR	07/08/2008	GW	045-16240	CHEVRON TR 311-33-597	<input checked="" type="checkbox"/>
417327	WELL	XX	05/19/2010	LO	045-19476	Chevron TR 12-33-597	<input type="checkbox"/>
417328	WELL	XX	05/19/2010	LO	045-19477	Chevron TR 342-32-597	<input type="checkbox"/>
417332	WELL	XX	05/19/2010	LO	045-19480	Chevron TR 541-32-597	<input type="checkbox"/>
417333	WELL	XX	05/19/2010	LO	045-19481	Chevron TR 432-32-597	<input type="checkbox"/>
417334	WELL	PR	04/01/2012	LO	045-19482	Chevron TR 332-32-597	<input type="checkbox"/>
417335	WELL	XX	05/19/2010	LO	045-19483	Chevron TR 531-32-597	<input type="checkbox"/>
417336	WELL	XX	05/19/2010	LO	045-19484	Chevron TR 431-32-597	<input type="checkbox"/>
417339	WELL	XX	05/19/2010	LO	045-19487	Chevron TR 441-32-597	<input type="checkbox"/>
417340	WELL	PR	09/01/2012	GW	045-19488	Chevron TR 412-33-597	<input checked="" type="checkbox"/>
417341	WELL	XX	05/19/2010	LO	045-19489	Chevron TR 442-32-597	<input type="checkbox"/>
417342	WELL	PR	09/01/2012	GW	045-19490	Chevron TR 42-32-597	<input checked="" type="checkbox"/>
417343	WELL	XX	05/19/2010	LO	045-19491	Chevron TR 312-33-597	<input type="checkbox"/>

Equipment:Location Inventory

Inspector Name: LONGWORTH, MIKE

Special Purpose Pits: _____	Drilling Pits: <u>3</u>	Wells: <u>18</u>	Production Pits: <u>1</u>
Condensate Tanks: <u>2</u>	Water Tanks: <u>6</u>	Separators: <u>5</u>	Electric Motors: _____
Gas or Diesel Mortors: _____	Cavity Pumps: _____	LACT Unit: _____	Pump Jacks: _____
Electric Generators: _____	Gas Pipeline: <u>1</u>	Oil Pipeline: _____	Water Pipeline: <u>2</u>
Gas Compressors: _____	VOC Combustor: <u>1</u>	Oil Tanks: <u>2</u>	Dehydrator Units: _____
Multi-Well Pits: _____	Pigging Station: _____	Flare: _____	Fuel Tanks: _____

Location

Lease Road:

Type	Satisfactory/Unsatisfactory	comment	Corrective Action	Date
Access	Satisfactory	Road little rough and rutted		

Signs/Marker:

Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
BATTERY				
CONTAINERS	Satisfactory			
WELLHEAD	Satisfactory	TR 41-32 (045-10654) Well sign has wrong Api# Same as TR 411-33		
TANK LABELS/PLACARDS				

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

Comment: _____

Corrective Action: _____

Spills:

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

Fencing:

Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
WELLHEAD	Satisfactory			
TANK BATTERY	Satisfactory			
SEPARATOR	Satisfactory			

Equipment:

Type	#	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
Plunger Lift	9	Satisfactory			
Horizontal Heated Separator	10	Satisfactory			
Bird Protectors	8	Satisfactory			
Ancillary equipment	2	Satisfactory			

Facilities:		<input type="checkbox"/> New Tank		Tank ID: _____	
Contents	#	Capacity	Type	SE GPS	
PRODUCED WATER	1	OTHER	HEATED STEEL AST	39.574300,108.292520	
S/U/V:	Satisfactory		Comment: _____		
Corrective Action: _____				Corrective Date: _____	
<u>Paint</u>					
Condition	Adequate				
Other (Content) _____					
Other (Capacity) 10,000 bbls _____					
Other (Type) _____					
<u>Berms</u>					
Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance	
Metal	Adequate	Walls Sufficient	Base Sufficient	Adequate	
Corrective Action				Corrective Date	
Comment					
Facilities:		<input type="checkbox"/> New Tank		Tank ID: _____	
Contents	#	Capacity	Type	SE GPS	
CONDENSATE	1	400 BBLS	HEATED STEEL AST	,	
S/U/V:	Satisfactory		Comment: _____		
Corrective Action: _____				Corrective Date: _____	
<u>Paint</u>					
Condition	Adequate				
Other (Content) _____					
Other (Capacity) _____					
Other (Type) _____					
<u>Berms</u>					
Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance	
Corrective Action				Corrective Date	
Comment					

Facilities:		<input type="checkbox"/> New Tank		Tank ID: _____	
Contents	#	Capacity	Type	SE GPS	
CONDENSATE	2	400 BBLS	STEEL AST	,	
S/U/V:	Satisfactory		Comment: _____		
Corrective Action: _____				Corrective Date: _____	
<u>Paint</u>					
Condition	Adequate				
Other (Content) _____					
Other (Capacity) _____					
Other (Type) _____					
<u>Berms</u>					
Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance	
Corrective Action				Corrective Date	
Comment					
Facilities:		<input type="checkbox"/> New Tank		Tank ID: _____	
Contents	#	Capacity	Type	SE GPS	
CONDENSATE	3	400 BBLS	STEEL AST	,	
S/U/V:	Satisfactory		Comment: _____		
Corrective Action: _____				Corrective Date: _____	
<u>Paint</u>					
Condition	Adequate				
Other (Content) _____					
Other (Capacity) _____					
Other (Type) _____					
<u>Berms</u>					
Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance	
Corrective Action				Corrective Date	
Comment					
Venting:					
Yes/No	Comment				
YES	Bradens venting				
Flaring:					
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date	
<u>Predrill</u>					
Location ID: 335915					
Site Preparation:					
Lease Road Adeq.: _____		Pads: _____		Soil Stockpile: _____	
Corrective Action: _____		Date: _____		CDP Num.: _____	

Form 2A COAs:

Group	User	Comment	Date
Agency	liny	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.	05/07/2010
Agency	liny	The nearby hillside must be monitored for any day-lighting of drilling fluids throughout the drilling of the surface casing interval.	05/07/2010
Agency	liny	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.	05/07/2010
Agency	liny	Reserve pit must be lined.	05/07/2010
Agency	liny	Operator must ensure 110 percent secondary containment for any volume of fluids contained at well site during drilling and completion operations. If fluids are conveyed via pipeline, operator must implement best management practices to contain any unintentional release of fluids.	05/07/2010
Agency	liny	All pits must be lined.	05/07/2010

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:

Inspector Name: LONGWORTH, MIKE

Onsite Inspection Memorandum Summarizing Discussions at Inspection as Attachment:

Facility

Facility ID: 277263 Type: WELL API Number: 045-10654 Status: PR Insp. Status: PR

Producing Well

Comment: Producing well. Well sign has wrong Api#

Facility ID: 296959 Type: WELL API Number: 045-16236 Status: PR Insp. Status: PR

Producing Well

Comment: Producing well

Facility ID: 296960 Type: WELL API Number: 045-16237 Status: PR Insp. Status: PR

Producing Well

Comment: Producing well

Facility ID: 296961 Type: WELL API Number: 045-16238 Status: PR Insp. Status: PR

Producing Well

Comment: Producing well

Facility ID: 296962 Type: WELL API Number: 045-16239 Status: PR Insp. Status: PR

Producing Well

Comment: Producing well. Lube oil stain around well.

Facility ID: 296965 Type: WELL API Number: 045-16240 Status: PR Insp. Status: PR

Producing Well

Comment: Producing well

Facility ID: 417340 Type: WELL API Number: 045-19488 Status: PR Insp. Status: PR

Producing Well

Comment: Producing well

Facility ID: 417342 Type: WELL API Number: 045-19490 Status: PR Insp. Status: PR

Producing Well

Comment: Producing well

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:

Lat Long

Inspector Name: LONGWORTH, MIKE

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: RANGELAND

Comment: _____

1003a. Debris removed? In CM Crew installing combustor

CA _____ CA Date _____

Waste Material Onsite? Pass CM _____

CA _____ CA Date _____

Unused or unneeded equipment onsite? In CM _____

CA _____ CA Date _____

Pit, cellars, rat holes and other bores closed? Pass CM _____

CA _____ CA Date _____

Guy line anchors removed? Fail CM unmarked anchors

CA Mark or remove anchors CA Date **09/07/2013**

Guy line anchors marked? Fail CM unmarked anchors

CA Mark or remove anchors CA Date **09/07/2013**

1003b. Area no longer in use? Pass Production areas stabilized ? Pass

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 In Process

Final Reclamation/ Abandoned Location:

Date Final Reclamation Started: _____

Date Final Reclamation Completed: _____

Final Land Use: RANGELAND

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
Compaction	Pass	Compaction	Pass			
Berms	Pass	Berms	Pass	MHSP	Pass	chemical totes in secodnary containment.
Ditches	Pass	Ditches	Pass			
Gravel	Pass	Gravel	Pass			
Seeding		Culverts	Pass			

S/U/V: Satisfactory _____ Corrective Date: _____

Comment: _____

CA: _____