| 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

FIELD INSPECTION FORM | | | DE | ET | OE | ES |

DE	ET	OE	ES

Inspection Date: 11/19/2013

Document Number: 668701252

Overall Inspection: Satisfactory

| Location Identifier | Facility ID 203130 | Loc ID 377019 | Inspector Name: HELGELAND, GARY | On-Site Inspection ☐ 2A Doc Num: |

Operator Information:

OGCC Operator Number:

Name of Operator: APACHE CORPORATION

Address: 2000 POST OAK BLVD #100

City: HOUSTON   State: TX   Zip: 77056-

☐ THIS IS A FOLLOW UP INSPECTION

☐ FOLLOW UP INSPECTION REQUIRED

☒ NO FOLLOW UP INSPECTION REQUIRED

☐ INSPECTOR REQUESTS FORM 42 WHEN CORRECTIVE ACTIONS ARE COMPLETED

Contact Information:

Contact Name	Phone	Email	Comment
FLEMING, STEVEN	432-818-1132	steven.fleming@apachecorp.com	ENVIRONMENTAL SUPERVISOR

Compliance Summary:

QtrQtr: SENW   Sec: 23   Twp: 1S   Range: 59W

Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Unsatisfactory	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
05/16/2012	663400283	PA	PA	Unsatisfactory		Fail	No

Inspector Comment:

Related Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status	
203130	WELL	PA	06/15/1987	OW	001-08539	LILLIAN 22-23	PA	☒

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

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

Comment: _____

Corrective Action: _____

Spills:

Type	Area	Volume	Corrective action	CA Date

Inspector Name: HELGELAND, GARY

☐ Multilple Spills and Releases?

Venting:

Yes/No	Comment

Flaring:

Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date

Predrill

Location ID: 203130

Site Preparation:

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

S/U/V: _____

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

Form 2A COAs:

S/U/V: _____   **Comment:** _____

CA: _____   **Date:** _____

Wildlife BMPs:

S/U/V: _____   **Comment:** _____

CA: _____   **Date:** _____

Stormwater:

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:	203130	Type:	WELL	API Number:	001-08539	Status:	PA	Insp. Status:	PA

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

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: [_____]

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

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   Pass

Debris removed   Pass   No disturbance /Location never built _____

Access Roads   Regraded   Pass   Contoured   Pass   Culverts removed   Pass

Gravel removed   Pass

Location and associated production facilities reclaimed   Pass   Locations, facilities, roads, recontoured   Pass

Compaction alleviation   Pass   Dust and erosion control   Pass

Non cropland: Revegetated 80% _____   Cropland: perennial forage   Pass

Weeds present   Pass   Subsidence   Pass

Comment: Site located in cultivated field.

Corrective Action: [   ]   Date _____

Overall Final Reclamation _____ Pass   Well Release on Active Location ☐   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: Satisfactory _____   Corrective Date: _____

Comment: [   ]

CA: [   ]

Pits: ☐   NO SURFACE INDICATION OF PIT