

**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:

01/14/2014

Document Number:

663902649

Overall Inspection:

Satisfactory**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection
	<u>335856</u>	<u>335856</u>	<u>LONGWORTH, MIKE</u>	<input type="checkbox"/> 2A Doc Num: _____

Operator Information:

OGCC Operator Number:

Name of Operator: ENCANA OIL & GAS (USA) INCAddress: 370 17TH ST STE 1700City: DENVER State: CO Zip: 80202-

- ☐ 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
Kellerby, Shaun		shaun.kellerby@state.co.us	
Insp., General	970-285-2665	cogcc.inspections@encana.com	

Compliance Summary:QtrQtr: SWNW Sec: 9 Twp: 6S Range: 96W**Inspector Comment:**No evidence the Abandon Location wells.**Related Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status	
293332	WELL	AL	02/23/2009	LO	045-14938	N. PARACHUTE MF05D E09 696	AL	<input checked="" type="checkbox"/>
293448	WELL	PR	06/10/2011	GW	045-14991	N. Parachute MF15A E09 696	PR	<input type="checkbox"/>
293449	WELL	PR	07/13/2011	GW	045-14992	N. Parachute MF10A E09 696	PR	<input type="checkbox"/>
293450	WELL	PR	06/10/2011	GW	045-14993	N. Parachute MF10B E09 696	PR	<input type="checkbox"/>
293451	WELL	PR	06/10/2011	GW	045-14994	N. Parachute MF10C E09 696	PR	<input type="checkbox"/>
293452	WELL	PR	07/13/2011	GW	045-14995	N. Parachute MF10D E09 696	PR	<input type="checkbox"/>
293453	WELL	PR	05/12/2011	GW	045-14996	N. Parachute MF07C E09 696	PR	<input type="checkbox"/>
293454	WELL	AL	02/23/2009	LO	045-14997	N. PARACHUTE MF05B E09 696	AL	<input checked="" type="checkbox"/>
293455	WELL	AL	05/01/2008	LO	045-14998	N. PARACHUTE MF03D E09 696	AL	<input checked="" type="checkbox"/>
293466	WELL	AL	12/07/2009	LO	045-15003	N. PARACHUTE MF07A E09 696	AL	<input checked="" type="checkbox"/>
293468	WELL	AL	02/23/2009	LO	045-15004	N. PARACHUTE MF06C E09 696	AL	<input checked="" type="checkbox"/>

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293469	WELL	AL	02/23/2009	LO	045-15005	N. PARACHUTE MF06B E09 696	AL	<input checked="" type="checkbox"/>
414642	WELL	PR	05/12/2011	GW	045-18867	N.PARACHUTE MF02C- 9 E09 696	PR	<input type="checkbox"/>
414644	WELL	PR	06/10/2011	GW	045-18886	N.PARACHUTE MF07D- 9 E09 696	PR	<input type="checkbox"/>

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
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☐ Multiple Spills and Releases?

Venting:

Yes/No	Comment

Flaring:

Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date

Predrill

Location ID: 335856

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: 293332 Type: WELL API Number: 045-14938 Status: AL Insp. Status: AL

Facility ID: 293454 Type: WELL API Number: 045-14997 Status: AL Insp. Status: AL

Facility ID: 293455 Type: WELL API Number: 045-14998 Status: AL Insp. Status: AL

Facility ID: 293466 Type: WELL API Number: 045-15003 Status: AL Insp. Status: AL

Facility ID: 293468 Type: WELL API Number: 045-15004 Status: AL Insp. Status: AL

Facility ID: 293469 Type: WELL API Number: 045-15005 Status: AL Insp. Status: AL

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? _____

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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 _____

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 _____

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: _____ Corrective Date: _____

Comment: _____

CA: _____

Pits: ☐ NO SURFACE INDICATION OF PIT