

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



| | | | |
|----|----|----|----|
| DE | ET | OE | ES |
|----|----|----|----|

Inspection Date:
12/26/2014

Document Number:
674700794

Overall Inspection:

ACTION REQUIRED

FIELD INSPECTION FORM

| | | | | | |
|---------------------|---------------|---------------|------------------------|--------------------------|-------------|
| Location Identifier | Facility ID | Loc ID | Inspector Name: | On-Site Inspection | 2A Doc Num: |
| | <u>335230</u> | <u>335230</u> | <u>LONGWORTH, MIKE</u> | <input type="checkbox"/> | |

Operator Information:

| | |
|-----------------------|--|
| OGCC Operator Number: | <u>96850</u> |
| Name of Operator: | <u>WPX ENERGY ROCKY MOUNTAIN LLC</u> |
| Address: | <u>1001 17TH STREET - SUITE #1200</u> |
| City: | <u>DENVER</u> State: <u>CO</u> Zip: <u>80202</u> |

- 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 |
|-----------------|--------------|--------------------------------------|-------------------------|
| Inspection, WPX | 970-263-2716 | COGCCInspectionReports@wpxenergy.com | WPX Inspection Mail Box |
| Giboo, David | | dgiboo@blm.gov | Petroleum Engineer Tech |

Compliance Summary:

| QtrQtr: | <u>SESW</u> | Sec: | <u>21</u> | Twp: | <u>6S</u> | Range: | <u>95W</u> |
|------------|-------------|------------|-------------|-------------------------------|-----------|----------------|-----------------|
| Insp. Date | Doc Num | Insp. Type | Insp Status | Satisfactory /Action Required | PA P/F/I | Pas/Fail (P/F) | Violation (Y/N) |
| 12/16/2013 | 663902510 | | | SATISFACTORY | | | No |

Inspector Comment:

Related Facilities:

| Facility ID | Type | Status | Status Date | Well Class | API Num | Facility Name | Insp Status |
|-------------|------|--------|-------------|------------|-----------|-------------------|--|
| 111456 | PIT | | 09/23/1999 | | - | 1-W-21 | <input type="checkbox"/> |
| 210824 | WELL | PR | 09/29/1989 | GW | 045-06582 | DOE 1-W-21 | PR <input checked="" type="checkbox"/> |
| 272217 | WELL | PR | 10/06/2004 | GW | 045-10046 | FEDERAL PA 24-21 | PR <input checked="" type="checkbox"/> |
| 272219 | WELL | PR | 10/12/2004 | GW | 045-10044 | FEDERAL PA 324-21 | PR <input checked="" type="checkbox"/> |
| 272220 | WELL | PR | 10/13/2004 | GW | 045-10043 | FEDERAL PA 424-21 | PR <input checked="" type="checkbox"/> |
| 272221 | WELL | PR | 10/15/2004 | GW | 045-10042 | FEDERAL PA 524-21 | PR <input checked="" type="checkbox"/> |
| 278043 | WELL | PR | 12/01/2005 | GW | 045-10826 | FEDERAL PA 314-21 | PR <input checked="" type="checkbox"/> |
| 278044 | WELL | PR | 01/06/2006 | GW | 045-10825 | FEDERAL PA 14-21 | PR <input checked="" type="checkbox"/> |
| 278045 | WELL | PR | 11/24/2005 | GW | 045-10824 | FEDERAL PA 13-21 | PR <input checked="" 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

| Signs/Marker: | | | | |
|----------------------|------------------------------|---------|-------------------|---------|
| Type | Satisfactory/Action Required | Comment | Corrective Action | CA Date |
| WELLHEAD | SATISFACTORY | | | |
| CONTAINERS | SATISFACTORY | | | |
| BATTERY | SATISFACTORY | | | |
| TANK LABELS/PLACARDS | SATISFACTORY | | | |

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

Comment: _____

Corrective Action: _____

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

| Fencing/: | | | | |
|------------------|------------------------------|---------|-------------------|---------|
| Type | Satisfactory/Action Required | Comment | Corrective Action | CA Date |
| WELLHEAD | SATISFACTORY | | | |
| TANK BATTERY | SATISFACTORY | | | |
| SEPARATOR | SATISFACTORY | | | |

| Equipment: | | | | | |
|-----------------------------|---|------------------------------|---|-------------------|---------|
| Type | # | Satisfactory/Action Required | Comment | Corrective Action | CA Date |
| Horizontal Heated Separator | 7 | SATISFACTORY | | | |
| Bird Protectors | 5 | SATISFACTORY | | | |
| Gas Meter Run | 1 | SATISFACTORY | | | |
| Plunger Lift | 7 | SATISFACTORY | | | |
| Ancillary equipment | 2 | SATISFACTORY | Chemical containers. Secondary containers are full. | | |

Facilities: New Tank Tank ID: _____

| Contents | # | Capacity | Type | SE GPS |
|----------------|---|----------|-----------|--------|
| PRODUCED WATER | 1 | 200 BBLS | STEEL AST | |

S/A/V: SATISFACTORY Comment: _____

| | |
|--------------------|------------------|
| Corrective Action: | Corrective Date: |
|--------------------|------------------|

Paint

| | |
|-----------|----------|
| Condition | Adequate |
|-----------|----------|

Other (Content) _____

Other (Capacity) _____

Other (Type) _____

Berms

| Type | Capacity | Permeability (Wall) | Permeability (Base) | Maintenance |
|------|----------|---------------------|---------------------|-------------|
| | | | | |

| | |
|-------------------------------------|-----------------|
| Corrective Action | Corrective Date |
| Comment: tanks are in the same berm | |

Facilities: New Tank Tank ID: _____

| Contents | # | Capacity | Type | SE GPS |
|------------|---|----------|-----------|--------|
| CONDENSATE | 1 | 300 BBLs | STEEL AST | , |

| | | |
|--------|--------------|----------|
| S/A/V: | SATISFACTORY | Comment: |
|--------|--------------|----------|

| | |
|--------------------|------------------|
| Corrective Action: | Corrective Date: |
|--------------------|------------------|

Paint

| | |
|-----------|----------|
| Condition | Adequate |
|-----------|----------|

Other (Content) _____

Other (Capacity) _____

Other (Type) _____

Berms

| Type | Capacity | Permeability (Wall) | Permeability (Base) | Maintenance |
|-------|----------|---------------------|---------------------|-------------|
| Metal | Adequate | Walls Sufficient | Base Sufficient | Adequate |

| | |
|-------------------|-----------------|
| Corrective Action | Corrective Date |
| Comment | |

Venting:

| | |
|--------|--|
| Yes/No | Comment |
| YES | Bradens are open to vent. Glycol pump at separators is venting |

Flaring:

| Type | Satisfactory/Action Required | Comment | Corrective Action | CA Date |
|------|------------------------------|---------|-------------------|---------|
| | | | | |

Predrill

Location ID: 335230

Site Preparation:

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

S/AV: _____

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

Form 2A COAs:

S/AV: _____ **Comment:** _____

CA: _____ **Date:** _____

Wildlife BMPs:

S/AV: _____ **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: 210824 Type: WELL API Number: 045-06582 Status: PR Insp. Status: PR

Producing Well

Comment: Producing well

Facility ID: 272217 Type: WELL API Number: 045-10046 Status: PR Insp. Status: PR

Producing Well

Comment: Producing well

Facility ID: 272219 Type: WELL API Number: 045-10044 Status: PR Insp. Status: PR

Producing Well

Comment: Producing well

| | | | | |
|---------------------|------------|-----------------------|------------|------------------|
| Facility ID: 272220 | Type: WELL | API Number: 045-10043 | Status: PR | Insp. Status: PR |
|---------------------|------------|-----------------------|------------|------------------|

Producing Well

Comment: Producing well

| | | | | |
|---------------------|------------|-----------------------|------------|------------------|
| Facility ID: 272221 | Type: WELL | API Number: 045-10042 | Status: PR | Insp. Status: PR |
|---------------------|------------|-----------------------|------------|------------------|

Producing Well

Comment: Producing well

| | | | | |
|---------------------|------------|-----------------------|------------|------------------|
| Facility ID: 278043 | Type: WELL | API Number: 045-10826 | Status: PR | Insp. Status: PR |
|---------------------|------------|-----------------------|------------|------------------|

Producing Well

Comment: Producing well

| | | | | |
|---------------------|------------|-----------------------|------------|------------------|
| Facility ID: 278044 | Type: WELL | API Number: 045-10825 | Status: PR | Insp. Status: PR |
|---------------------|------------|-----------------------|------------|------------------|

Producing Well

Comment: Producing well

| | | | | |
|---------------------|------------|-----------------------|------------|------------------|
| Facility ID: 278045 | Type: WELL | API Number: 045-10824 | 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 _____
 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? Pass CM _____
 CA _____ CA Date _____

Waste Material Onsite? Pass CM _____
 CA _____ CA Date _____

Unused or unneeded equipment onsite? Pass CM _____
 CA _____ CA Date _____

Pit, cellars, rat holes and other bores closed? Pass 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? Fail 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: Used berms left on location

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 |
| | | Ditches | Pass | | | limited visual due to snow cover |
| Berms | Fail | | | | | Unneeded unused berms on location |
| | | Gravel | Pass | | | limited visual due to snow cover |
| Ditches | Pass | | | | | limited visual due to snow cover |
| Seeding | | | | | | |
| | | Compaction | Pass | | | |
| Waddles | Fail | | | | | Waddles are falling out of place |
| Compaction | Pass | | | | | |
| | | Culverts | Pass | | | |
| | | | | MHSP | Fail | Secondary containments are full of fluid |
| Gravel | Pass | | | | | limited visual due to snow cover |

S/AV: **ACTION REQUIRED** Corrective Date: **01/31/2015**

Comment: _____

CA: **Repair and maintain BMPs,**

Pits: NO SURFACE INDICATION OF PIT

Attached Documents

You can go to COGCC Images (<https://cogcc.state.co.us/weblink/>) and search by document number:

| Document Num | Description | URL |
|--------------|-------------------------|---|
| 674700796 | Location #335230 photos | http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3516063 |

ACTION REQUIRED

ANY ACTION REQUIRED items listed on this report indicate that the oil and gas facility or the oil and gas operations listed on the report may be in violation of the rules and regulations of the Colorado Oil and Conservation Commission (“COGCC”) and corrective action is required.

There is reasonable cause to believe that a violation of the Oil and Gas Conservation Act, or of any rule, regulation, or order of the Commission, or of any permit issued by the Commission, has occurred. The Operator’s compliance with this Inspection Report is required to resolve these alleged violations. This document requires the Operator to timely respond to the COGCC and to comply with directives as listed by the **Corrective Action Deadline Date**. Failure to do so will result in the issuance of a Notice of Alleged Violation and initiation of enforcement proceedings in which COGCC will seek monetary penalties for the alleged violations pursuant to § 34-60-121, C.R.S. and Rule 523, COGCC Rules of Practice and Procedure, 2 CCR 404-1. (Please note that the COGCC's penalty authority was recently increased to a maximum of \$15,000 per day and penalties are no longer capped at a maximum of \$10,000 per violation.)