

**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
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Inspection Date:

03/26/2015

Document Number:

675201376

Overall Inspection:

SATISFACTORY**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection <input type="checkbox"/>	2A Doc Num:
	334071	334071	CONKLIN, CURTIS		

Operator Information:OGCC Operator Number: 100185Name 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
Encana,		cogcc.inspections@encana.com	All Inspections

Compliance Summary:QtrQtr: NWSW Sec: 28 Twp: 7S Range: 95W

Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Action Required	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
07/14/2014	675100215			ACTION REQUIRED			No

Inspector Comment:**Related Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status	
67350	LEASE	PR	05/15/1997		-	BOULDER BANK 3-7	PR	<input type="checkbox"/>
260555	WELL	PR	05/17/2012	GW	045-07867	S. PARACHUTE FEDERAL 28-31	PR	<input checked="" type="checkbox"/>
260626	WELL	AL	06/05/2003	LO	045-07882	S. PARACHUTE FEDERAL 29-44	AL	<input type="checkbox"/>
278100	WELL	PR	05/10/2012	GW	045-10838	FEDERAL 29-16 (PL28)	PR	<input checked="" type="checkbox"/>
278101	WELL	AL	04/13/2010	LO	045-10837	FEDERAL 28-13 (PL28)	AL	<input type="checkbox"/>
278374	WELL	PR	05/17/2012	GW	045-10873	FEDERAL 28-6 (PL28)	PR	<input checked="" type="checkbox"/>
278375	WELL	PR	05/24/2012	GW	045-10874	FEDERAL 28-14 (PL28)	PR	<input checked="" type="checkbox"/>
420779	WELL	PR	05/08/2012	GW	045-20214	Federal 28-6BB (PL28)	PR	<input checked="" type="checkbox"/>
420780	WELL	PR	06/07/2012	GW	045-20215	Federal 28-5 (PL28)	PR	<input checked="" type="checkbox"/>
420790	WELL	PR	05/09/2012	GW	045-20225	Federal 28-12BB (PL28)	PR	<input checked="" type="checkbox"/>

Inspector Name: CONKLIN, CURTIS

420794	WELL	PR	05/04/2012	GW	045-20229	Federal 28-13 (PL28)	PR	<input checked="" type="checkbox"/>
420798	WELL	PR	06/07/2012	GW	045-20233	Federal 28-11 (PL28)	PR	<input checked="" type="checkbox"/>
420807	WELL	PR	05/18/2012	GW	045-20234	Federal 29-9 (PL28)	PR	<input checked="" type="checkbox"/>
420808	WELL	PR	06/07/2012	GW	045-20235	Federal 28-11BB (PL28)	PR	<input checked="" type="checkbox"/>
420962	WELL	PR	05/28/2012	GW	045-20262	Federal 28-13BB (PL28)	PR	<input checked="" type="checkbox"/>

Equipment:Location Inventory

Special Purpose Pits: 1	Drilling Pits: _____	Wells: 12	Production Pits: _____
Condensate Tanks: 4	Water Tanks: _____	Separators: 12	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**Lease Road:**

Type	Satisfactory/Action Required	comment	Corrective Action	Date
Access	SATISFACTORY			

Signs/Marker:

Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
TANK LABELS/PLACARDS	SATISFACTORY			
WELLHEAD	SATISFACTORY			

Emergency Contact Number (S/A/V): SATISFACTORY

Corrective Date: _____

Comment: **970-285-2600**

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
LOCATION	SATISFACTORY			

Equipment:

Type	#	Satisfactory/Action Required	Comment	Corrective Action	CA Date
Bird Protectors	3	SATISFACTORY			
Horizontal Heated Separator	12	SATISFACTORY			
Gas Meter Run	1	SATISFACTORY			

Inspector Name: CONKLIN, CURTIS

Emission Control Device	1	SATISFACTORY	Lit		
Plunger Lift	12	SATISFACTORY			

Facilities: ☐ New Tank Tank ID: _____

Contents	#	Capacity	Type	SE GPS
METHANOL	1	1000 GAL	STEEL AST	,

S/A/V: SATISFACTORY Comment: _____

Corrective Action: _____ Corrective Date: _____

Paint

Condition	Adequate
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Other (Content) _____

Other (Capacity) _____

Other (Type) _____

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance

Corrective Action _____ Corrective Date _____

Comment **Same**

Facilities: ☐ New Tank Tank ID: _____

Contents	#	Capacity	Type	SE GPS
CONDENSATE	3	300 BBLS	STEEL AST	,

S/A/V: SATISFACTORY Comment: _____

Corrective Action: _____ Corrective Date: _____

Paint

Condition	Adequate
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Other (Content) _____

Other (Capacity) _____

Other (Type) _____

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance

Corrective Action _____ Corrective Date _____

Comment **Same**

Facilities: ☐ New Tank Tank ID: _____

Contents	#	Capacity	Type	SE GPS
CONDENSATE	4	500 BBLS	STEEL AST	,

S/A/V: SATISFACTORY Comment: _____

Corrective Action: _____ Corrective Date: _____

Paint

Condition	Adequate
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Other (Content) _____

Inspector Name: CONKLIN, CURTIS

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
NO	

Flaring:

Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date

Predrill

Location ID: 334071

Site Preparation:

Lease Road Adeq.: _____

Pads: _____

Soil Stockpile: _____

S/A/V: _____

Corrective Action: _____

Date: _____ CDP Num.: _____

Form 2A COAs:**S/A/V:** _____ **Comment:** _____**CA:** _____ **Date:** _____**Wildlife BMPs:****S/A/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: 260555 Type: WELL API Number: 045-07867 Status: PR Insp. Status: PR

Producing Well

Comment: PR w/ plunger

Facility ID: 278100 Type: WELL API Number: 045-10838 Status: PR Insp. Status: PR

Producing Well

Comment: PR w/ plunger

Facility ID: 278374 Type: WELL API Number: 045-10873 Status: PR Insp. Status: PR

Producing Well

Comment: PR w/ plunger

Facility ID: 278375	Type: WELL	API Number: 045-10874	Status: PR	Insp. Status: PR
Producing Well				
Comment: PR w/ plunger				

Facility ID: 420779	Type: WELL	API Number: 045-20214	Status: PR	Insp. Status: PR
Producing Well				
Comment: PR w/ plunger				

Facility ID: 420780	Type: WELL	API Number: 045-20215	Status: PR	Insp. Status: PR
Producing Well				
Comment: PR w/ plunger				

Facility ID: 420790	Type: WELL	API Number: 045-20225	Status: PR	Insp. Status: PR
Producing Well				
Comment: PR w/ plunger				

Facility ID: 420794	Type: WELL	API Number: 045-20229	Status: PR	Insp. Status: PR
Producing Well				
Comment: PR w/ plunger				

Facility ID: 420798	Type: WELL	API Number: 045-20233	Status: PR	Insp. Status: PR
Producing Well				
Comment: PR w/ plunger				

Facility ID: 420807	Type: WELL	API Number: 045-20234	Status: PR	Insp. Status: PR
Producing Well				
Comment: PR w/ plunger				

Facility ID: 420808	Type: WELL	API Number: 045-20235	Status: PR	Insp. Status: PR
Producing Well				
Comment: PR w/ plunger				

Facility ID: 420962	Type: WELL	API Number: 045-20262	Status: PR	Insp. Status: PR
Producing Well				
Comment: PR w/ plunger				

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: CONKLIN, CURTIS

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? _____ 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: 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 _____

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
Gravel	Pass					
Seeding	Pass					
Compaction	Pass	Culverts	Pass			
Rip Rap	Pass					
Drains	Pass	Gravel	Pass			
Berms	Pass	Compaction	Pass			

S/A/V: SATISFACTOR
Y

Corrective Date: _____

Comment: _____

CA: _____

Pits: ☒ NO SURFACE INDICATION OF PIT