

**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:

04/08/2015

Document Number:

674701237

Overall Inspection:

ACTION REQUIRED**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	335632	335632	LONGWORTH, MIKE	<input type="checkbox"/>	

Operator Information:OGCC Operator Number: 96850Name of Operator: WPX ENERGY ROCKY MOUNTAIN LLCAddress: 1001 17TH STREET - SUITE #1200City: 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
Fischer, Alex		alex.fischer@state.co.us	
Spencer, Stan		stan.spencer@state.co.us	
Lujan, Carlos		carlos.lujan@state.co.us	
Inspection, WPX	970-263-2716	COGCCInspectionReports@wpxenergy.com	WPX Inspection Mail Box

Compliance Summary:QtrQtr: NWSE Sec: 3 Twp: 5S Range: 97W

Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Action Required	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
10/28/2014	674700471			SATISFACTORY			No
06/18/2013	663801152			ACTION REQUIRED	I		No

Inspector Comment:**Related Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status	
286277	WELL	PR	08/21/2006	GW	045-12634	CHEVRON TR 23-3-597	PR	<input checked="" type="checkbox"/>
286298	WELL	PR	10/01/2012	GW	045-12641	CHEVRON TR 24-3-597	PR	<input checked="" type="checkbox"/>
286299	WELL	PR	08/22/2006	GW	045-12640	Chevron TR 534-3-597	PR	<input checked="" type="checkbox"/>
286300	WELL	PR	08/22/2006	GW	045-12639	CHEVRON TR 33-3-597	PR	<input checked="" type="checkbox"/>
286301	WELL	PR	01/01/2015	GW	045-12638	CHEVRON TR 424-3-597	PR	<input checked="" type="checkbox"/>
286302	WELL	PR	04/27/2007	GW	045-12637	CHEVRON TR 423-3-597	PR	<input checked="" type="checkbox"/>
286303	WELL	PR	08/22/2006	GW	045-12636	CHEVRON TR 34-3-597	PR	<input checked="" type="checkbox"/>

Inspector Name: LONGWORTH, MIKE

286304	WELL	PA	04/03/2007	DA	045-12635	CHEVRON TR 533-3-597	PA	<input checked="" type="checkbox"/>
286607	PIT	AC	09/06/2006		-	CHEVRON TR 33-3-597	AC	<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 Motors: _____	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			
BATTERY	SATISFACTORY			
CONTAINERS	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
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☐ Multiple Spills and Releases?**Fencing/:**

Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
TANK BATTERY	SATISFACTORY			
WELLHEAD	SATISFACTORY			
PIT	SATISFACTORY			
SEPARATOR	SATISFACTORY			

Equipment:

Type	#	Satisfactory/Action Required	Comment	Corrective Action	CA Date
Dehydrator	1	SATISFACTORY			
Horizontal Heated Separator	9	SATISFACTORY			
Bird Protectors	6	SATISFACTORY			
Plunger Lift	7	SATISFACTORY			
Ancillary equipment	2	SATISFACTORY	Chemical containers at wells		

Facilities:☐ New Tank

Tank ID: _____

Inspector Name: LONGWORTH, MIKE

Contents	#	Capacity	Type	SE GPS
METHANOL	1	<50 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
Metal	Adequate	Walls Sufficient	Base Sufficient	Adequate

Corrective Action		Corrective Date	
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Comment	at separators
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Facilities:☐ New Tank

Tank ID: _____

Contents	#	Capacity	Type	SE GPS
CONDENSATE	2	300 BBLS	STEEL AST	,

S/A/V:	SATISFACTORY		Comment:	
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Corrective Action:		Corrective Date:	
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Paint

Condition	Adequate
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Other (Content) _____

Other (Capacity) _____

Other (Type) _____

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Earth	Adequate	Walls Sufficient	Base Sufficient	Adequate

Corrective Action		Corrective Date	
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Comment	
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Venting:

Yes/No	Comment
YES	Bradens are open to vent

Flaring:

Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date

Predrill

Location ID: 335632

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: 286277 Type: WELL API Number: 045-12634 Status: PR Insp. Status: PR

Producing Well

Comment: Producing well

Facility ID: 286298 Type: WELL API Number: 045-12641 Status: PR Insp. Status: PR

Producing Well

Comment: Producing well

Facility ID: 286299 Type: WELL API Number: 045-12640 Status: PR Insp. Status: PR

Producing Well

Comment: Producing well

Facility ID: 286300 Type: WELL API Number: 045-12639 Status: PR Insp. Status: PR

Producing Well

Comment: Producing well

Facility ID: 286301 Type: WELL API Number: 045-12638 Status: PR Insp. Status: PR

Producing Well

Comment: Producing well

Facility ID: 286302 Type: WELL API Number: 045-12637 Status: PR Insp. Status: PR

Producing Well

Comment: Producing well

Facility ID: 286303 Type: WELL API Number: 045-12636 Status: PR Insp. Status: PR

Producing Well

Comment: Producing well

Facility ID: 286304 Type: WELL API Number: 045-12635 Status: PA Insp. Status: PA

Facility ID: 286607 Type: PIT API Number: - Status: AC Insp. Status: AC

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? <u>Pass</u> CM _____ CA _____ CA Date _____ Waste Material Onsite? <u>Pass</u> CM _____ CA _____ CA Date _____ Unused or unneeded equipment onsite? <u>Pass</u> 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	
<u>Cropland</u>	
Top soil replaced _____	Recontoured _____ Perennial forage re-established _____
<u>Non-Cropland</u>	
Top soil replaced _____	Recontoured _____ 80% Revegetation _____
1003 f.	Weeds Noxious weeds? _____
Comment: <div style="border: 1px solid black; height: 20px;"></div>	
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:

Inspector Name: LONGWORTH, MIKE

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					
		Gravel	Pass			
Ditches	Pass					
		Culverts	Pass			
Compaction	Pass					
				MHSP	Pass	Secondary containment under chemical containers
		Compaction	Pass			
Berms	Pass					
		Ditches	Pass			
		Check Dams	Pass			
				SR	Pass	

S/A/V: SATISFACTOR Y Corrective Date: _____

Comment: _____

CA: _____

Pits: ☐ NO SURFACE INDICATION OF PIT

Pit Type: Produced Water Lined: YES Pit ID: 286607 Lat: 39.640250 Long: -108.264100

Lining:

Liner Type: _____ Liner Condition: Inadequate

Comment: Floating liner in center of pit.

Fencing:

Fencing Type: Netting/Fen Fencing Condition: Adequate

Comment: _____

Netting:

Netting Type: Fence/Net Netting Condition: Gaps

Comment: Netting has gaps around load lines.

Anchor Trench Present: YES Oil Accumulation: YES 2+ feet Freeboard: _____

Pit (S/A/V): ACTION Comment: _____

Corrective Action: Remove oil from pit. Inspect pit liner and report findings to COGCC staff. Repair netting. Date: 04/11/2015

Permit:	Facility ID	Permit Num	Expiration Date
	286607	1433509	
	286607	1433509	

Monitoring:	Monitoring Type	Comment
	Telemetry	

Attached Documents

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

Document Num	Description	URL
674701238	Oil on pit with floating liner	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3587854

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.)