

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:
04/16/2015

Document Number:
666800878

Overall Inspection:
SATISFACTORY

FIELD INSPECTION FORM

| | | | | | |
|---------------------|-------------|--------|-----------------|--------------------------|-------------|
| Location Identifier | Facility ID | Loc ID | Inspector Name: | On-Site Inspection | 2A Doc Num: |
| | 266197 | 311608 | Murray, Richard | <input type="checkbox"/> | |

Operator Information:

OGCC Operator Number: 100185

Name of Operator: ENCANA OIL & GAS (USA) INC

Address: 370 17TH ST STE 1700

City: 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 |
|------------------|-------|------------------------------|---------|
| Contact, General | | cogcc.inspections@encana.com | |

Compliance Summary:

QtrQtr: SENW Sec: 12 Twp: 7S Range: 93W

| Insp. Date | Doc Num | Insp. Type | Insp Status | Satisfactory /Action Required | PA P/F/I | Pas/Fail (P/F) | Violation (Y/N) |
|------------|-----------|------------|-------------|-------------------------------|----------|----------------|-----------------|
| 03/25/2015 | 666800801 | PR | TA | ACTION REQUIRED | | | No |
| 07/25/2013 | 670200706 | SI | SI | SATISFACTORY | P | | No |
| 09/26/2006 | 200102357 | CO | PR | ACTION REQUIRED | I | Pass | Yes |
| 01/28/2004 | 200051996 | PR | PR | SATISFACTORY | | Pass | No |

Inspector Comment:

Action required items noted on previous inspection have been satisfied

Related Facilities:

| Facility ID | Type | Status | Status Date | Well Class | API Num | Facility Name | Insp Status | |
|-------------|------|--------|-------------|------------|-----------|------------------------|-------------|-------------------------------------|
| 266194 | WELL | PR | 11/08/2003 | GW | 045-09125 | SCHAEFFER 12-6C (F12W) | PR | <input checked="" type="checkbox"/> |
| 266195 | WELL | TA | | GW | 045-09126 | SHAEFFER 12-6A (F12) | TA | <input checked="" type="checkbox"/> |
| 266197 | WELL | PR | 10/01/2013 | GW | 045-09128 | SCHAEFFER 12-6B (F12W) | TA | <input checked="" type="checkbox"/> |
| 276405 | WELL | AL | 06/06/2011 | LO | 045-10455 | SHAEFFER 12-11A (F12W) | AL | <input checked="" type="checkbox"/> |
| 276406 | WELL | PR | 01/20/2006 | GW | 045-10454 | SHAEFFER 12-3A (F12W) | PR | <input checked="" type="checkbox"/> |
| 276407 | WELL | PR | 02/06/2006 | GW | 045-10453 | SHAEFFER 12-12A (F12W) | PR | <input checked="" type="checkbox"/> |
| 276408 | WELL | DA | 11/30/2005 | LO | 045-10452 | SHAEFFER 12-6A1 (F12W) | AL | <input checked="" type="checkbox"/> |

Equipment:

Location Inventory

Inspector Name: Murray, Richard

| | | | |
|------------------------------|------------------------|---------------------|-------------------------|
| 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/A/V): SATISFACTORY Corrective Date: _____

Comment: _____

Corrective Action: _____

Spills:

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

Equipment:

| Type | # | Satisfactory/Action Required | Comment | Corrective Action | CA Date |
|---------------------------|---|------------------------------|---------|-------------------|---------|
| Ancillary equipment | 1 | SATISFACTORY | | | |
| Gas Meter Run | 1 | SATISFACTORY | | | |
| Plunger Lift | 7 | SATISFACTORY | | | |
| Vertical Heated Separator | 6 | SATISFACTORY | | | |

Venting:

| Yes/No | Comment |
|--------|---------|
| NO | |

Flaring:

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

Predrill

Location ID: 266197

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: 266194 Type: WELL API Number: 045-09125 Status: PR Insp. Status: PR

Producing Well

Comment: Plunger lift

Facility ID: 266195 Type: WELL API Number: 045-09126 Status: TA Insp. Status: TA

Idle Well

Purpose: Shut In Temporarily Abandoned Reminder: _____

S/A/V: SATISFACTORY CA Date: _____

CA: _____

Comment: Form 4 on file for P & A

Facility ID: 266197 Type: WELL API Number: 045-09128 Status: PR Insp. Status: TA

Idle Well

Purpose: Shut In Temporarily Abandoned Reminder: _____

S/A/V: _____ CA Date: _____

CA: _____

Comment: Form 4 on file for P & A

Facility ID: 276405 Type: WELL API Number: 045-10455 Status: AL Insp. Status: AL

Idle Well

Purpose: Shut In Temporarily Abandoned Reminder: _____

S/A/V: _____ CA Date: _____

CA: _____

Comment: No visal sign of well

Facility ID: 276406 Type: WELL API Number: 045-10454 Status: PR Insp. Status: PR

Producing Well

Comment: Plunger lift

Facility ID: 276407 Type: WELL API Number: 045-10453 Status: PR Insp. Status: PR

Producing Well

Comment: Plunger lift

Facility ID: 276408 Type: WELL API Number: 045-10452 Status: DA Insp. Status: AL

Idle Well

Purpose: Shut In Temporarily Abandoned Reminder: _____

S/A/V: _____ CA Date: _____

CA: _____

Comment: No visal sign of 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:

DWR Receipt Num: _____ Owner Name: _____ GPS: _____ Lat _____ Long _____

Field Parameters:

Sample Location: _____

Emission Control Burner (ECB): N

Comment: _____

Pilot: _____ Wildlife Protection Devices (fired vessels): YES

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? Pass CM _____

CA _____ CA Date _____

Guy line anchors marked? _____ CM _____

CA _____ CA Date _____

1003b. Area no longer in use? Pass Production areas stabilized ? Pass

1003c. Compacted areas have been cross ripped? Pass

1003d. Drilling pit closed? Pass 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 _____

Inspector Name: Murray, Richard

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 |
|------------------|-----------------|-------------------------|-----------------------|---------------|--------------------------|---------|
| Slope Roughening | Pass | | | | | |
| | | Ditches | Pass | | | |
| Ditches | Pass | | | | | |
| Berms | Pass | | | | | |
| | | Gravel | Pass | | | |
| Seeding | Pass | | | | | |
| | | Culverts | Pass | | | |

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

Comment: _____

CA: _____

Pits: NO SURFACE INDICATION OF PIT