

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:
06/11/2015

Document Number:
666801066

Overall Inspection:
SATISFACTORY

FIELD INSPECTION FORM

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	<u>211129</u>	<u>323901</u>	<u>Murray, Richard</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
, Inspections		COGCCInspectionReports@wpxenergy.com	Field Inspections

Compliance Summary:

QtrQtr: SWNW Sec: 35 Twp: 6S Range: 94W

Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Action Required	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
03/14/2000	200005845	PR	PR	SATISFACTORY		Pass	No
11/17/1997	500142671	CO	PR				
09/12/1994	500142670		DG				

Inspector Comment:

Related Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status	
211129	WELL	PR	12/23/1994	GW	045-06888	SAVAGE RMV 15-35	PR	<input checked="" type="checkbox"/>
421918	WELL	PR	12/26/2012	GW	045-20449	Savage RWF 343-34	PR	<input checked="" type="checkbox"/>
421919	WELL	PR	09/13/2012	GW	045-20450	Savage RWF 312-35	PR	<input checked="" type="checkbox"/>
421920	WELL	PR	12/14/2012	GW	045-20451	Savage RWF 542-34	PR	<input checked="" type="checkbox"/>
421921	WELL	PR	09/13/2012	GW	045-20452	Savage RWF 42-34	PR	<input checked="" type="checkbox"/>
421922	WELL	PR	10/12/2012	GW	045-20453	Savage RWF 522-35	PR	<input checked="" type="checkbox"/>
421923	WELL	PR	12/26/2012	GW	045-20454	Savage RWF 323-35	PR	<input checked="" type="checkbox"/>
421924	WELL	PR	10/12/2012	GW	045-20455	Savage RWF 422-35	PR	<input checked="" type="checkbox"/>
421925	WELL	PR	09/13/2012	GW	045-20456	Savage RWF 441-34	PR	<input checked="" type="checkbox"/>

421926	WELL	PR	10/12/2012	GW	045-20457	Savage RWF 342-34	PR	<input checked="" type="checkbox"/>
421927	WELL	PR	10/12/2012	GW	045-20458	Savage RWF 442-34	PR	<input checked="" type="checkbox"/>
421928	WELL	PR	12/14/2012	GW	045-20459	Savage RWF 22-35	PR	<input checked="" type="checkbox"/>
421929	WELL	PR	09/30/2012	GW	045-20460	Savage RWF 23-35	PR	<input checked="" type="checkbox"/>
421930	WELL	PR	12/26/2012	GW	045-20461	Savage RWF 412-35	PR	<input checked="" type="checkbox"/>
421931	WELL	PR	09/13/2012	GW	045-20462	Savage RWF 12-35	PR	<input checked="" type="checkbox"/>
422119	WELL	PR	01/01/2013	GW	045-20492	Savage RWF 313-35	PR	<input checked="" type="checkbox"/>
422187	WELL	PR	12/26/2012	GW	045-20520	Savage RWF 413-35	PR	<input checked="" type="checkbox"/>

Equipment: Location Inventory

Special Purpose Pits: _____	Drilling Pits: _____	Wells: <u>17</u>	Production Pits: _____
Condensate Tanks: <u>2</u>	Water Tanks: _____	Separators: <u>17</u>	Electric Motors: _____
Gas or Diesel Mortors: _____	Cavity Pumps: _____	LACT Unit: _____	Pump Jacks: _____
Electric Generators: _____	Gas Pipeline: <u>1</u>	Oil Pipeline: _____	Water Pipeline: <u>1</u>
Gas Compressors: _____	VOC Combustor: <u>1</u>	Oil Tanks: _____	Dehydrator Units: _____
Multi-Well Pits: _____	Pigging Station: _____	Flare: _____	Fuel Tanks: _____

Location

Signs/Marker:				
Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
BATTERY	SATISFACTORY	AIRS ID 045-2200-001		
WELLHEAD	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
<input type="checkbox"/> Multiple Spills and Releases?				

Equipment:					
Type	#	Satisfactory/Action Required	Comment	Corrective Action	CA Date
Horizontal Heated Separator	17	SATISFACTORY			
Plunger Lift	17	SATISFACTORY			

Ancillary equipment	5	SATISFACTORY	Chemical units at wellhead		
Emission Control Device	2	SATISFACTORY			

Facilities: New Tank Tank ID: _____

Contents	#	Capacity	Type	SE GPS	
CONDENSATE	2	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 Insufficient	Base Insufficient	Adequate	
Corrective Action				Corrective Date	
Comment					

Facilities: New Tank Tank ID: _____

Contents	#	Capacity	Type	SE GPS	
PRODUCED WATER	2	300 BBLS	STEEL AST	,	
S/A/V:	SATISFACTORY		Comment: Centralized battery		
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					

Venting:

Yes/No	Comment
YES	Bradenhead valves open

Flaring:

Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date

Predrill

Location ID: 211129

Site Preparation:

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

S/A/V: _____

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

Form 2A COAs:

Group	User	Comment	Date
OGLA	kubeczko	<p>GENERAL SITE COAs:</p> <p>Notify COGCC Oil and Gas Location Assessment (OGLA) Specialist for Western Colorado (Dave Kubeczko; email dave.kubeczko@state.co.us; phone 970-309-2514) 48 hours prior to start of construction (expansion on existing pads).</p> <p>Operator must implement best management practices to contain any unintentional release of fluids, including any fluids conveyed via temporary surface pipelines.</p> <p>Reserve pit, or any other pit used to contain/hold fluids, if constructed, must be lined or a closed loop system (as indicated on the Form 2A Permit application by operator in Section 6. Construction) must be implemented during drilling.</p> <p>Operator must ensure secondary containment for any volume of fluids contained at well site during drilling and completion operations; including, but not limited to, construction of a berm or diversion dike, diversion/collection trenches within and/or outside of berms/dikes, site grading, or other comparable measures (i.e., best management practices (BMPs) associated with stormwater management) sufficiently protective of nearby surface water. Any berm constructed at the well pad location will be stabilized, inspected at regular intervals (at least every 14 days), and maintained in good condition.</p> <p>Flowback and stimulation fluids must be sent to tanks to allow the sand to settle out before the fluids can be placed into any pipeline or pit located on the well pad. The flowback and stimulation fluid tanks must be placed on the well pad in an area with additional downgradient perimeter berming. The area where flowback fluids will be stored/reused must be constructed to be sufficiently impervious to contain any spilled or released material (per Rule 604.a.(4)).</p> <p>Notify the COGCC Oil and Gas Location Assessment (OGLA) Specialist for Western Colorado (Dave Kubeczko; email dave.kubeczko@state.co.us) and the COGCC Field Inspection Supervisor for Northwest Colorado (Shaun Kellerby; email shaun.kellerby@state.co.us) 48 hours prior to start of fracing operations.</p> <p>Berms or other containment devices shall be constructed in compliance with Rule 603.e.(12) around crude oil, condensate, and produced water storage tanks.</p> <p>The moisture content of any drill cuttings in a cuttings pit, trench, or pile shall be as low as practicable to prevent accumulation of liquids greater than de minimis amounts. At the time of closure, the drill cuttings must also meet the applicable standards of table 910-1.</p>	03/07/2011

S/A/V: SATISFACTORY

Comment: No drilling or completions being performed at time of inspection, No visal sign of cuttings or pits

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: 211129 Type: WELL API Number: 045-06888 Status: PR Insp. Status: PR

Producing Well

Comment: Plunger lift

Facility ID: 421918 Type: WELL API Number: 045-20449 Status: PR Insp. Status: PR

Producing Well

Comment: Plunger lift

Facility ID: 421919 Type: WELL API Number: 045-20450 Status: PR Insp. Status: PR

Producing Well

Comment: Plunger lift

Facility ID: 421920 Type: WELL API Number: 045-20451 Status: PR Insp. Status: PR

Producing Well

Comment: Plunger lift

Facility ID: 421921 Type: WELL API Number: 045-20452 Status: PR Insp. Status: PR

Producing Well

Comment: Plunger lift

Facility ID: 421922 Type: WELL API Number: 045-20453 Status: PR Insp. Status: PR

Producing Well

Comment: Plunger lift

Facility ID: 421923 Type: WELL API Number: 045-20454 Status: PR Insp. Status: PR

Producing Well

Comment: Plunger lift

Facility ID: 421924 Type: WELL API Number: 045-20455 Status: PR Insp. Status: PR

Producing Well

Comment: Plunger lift

Facility ID: 421925 Type: WELL API Number: 045-20456 Status: PR Insp. Status: PR

Producing Well

Comment: Plunger lift

Facility ID: 421926 Type: WELL API Number: 045-20457 Status: PR Insp. Status: PR

Producing Well

Comment: Plunger lift

Facility ID: 421927 Type: WELL API Number: 045-20458 Status: PR Insp. Status: PR

Producing Well

Comment: Plunger lift

Facility ID: 421928 Type: WELL API Number: 045-20459 Status: PR Insp. Status: PR

Producing Well

Comment: Plunger lift

Facility ID: 421929 Type: WELL API Number: 045-20460 Status: PR Insp. Status: PR

Producing Well

Comment: Plunger lift

Facility ID: 421930 Type: WELL API Number: 045-20461 Status: PR Insp. Status: PR

Producing Well

Comment: Plunger lift

Facility ID: 421931 Type: WELL API Number: 045-20462 Status: PR Insp. Status: PR

Producing Well

Comment: Plunger lift

Facility ID: 422119 Type: WELL API Number: 045-20492 Status: PR Insp. Status: PR

Producing Well

Comment: Plunger lift

Facility ID: 422187 Type: WELL API Number: 045-20520 Status: PR Insp. Status: PR

Producing Well

Comment: Plunger lift

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 _____
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Field Parameters:

Sample Location: _____

Emission Control Burner (ECB): Y

Comment: _____

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

Reclamation - Storm Water - Pit

Interim Reclamation:

Date Interim Reclamation Started: _____ Date Interim Reclamation Completed: _____

Land Use: RANGELAND

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 _____

Inspector Name: Murray, Richard

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
		Culverts	Pass			
Slope Roughening	Pass					
Sediment Traps	Pass					
Berms	Pass					
		Ditches	Pass			
Seeding	Pass					
		Gravel	Pass			

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

Comment: _____

CA: _____

Pits: NO SURFACE INDICATION OF PIT