

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:
08/20/2015

Document Number:
674701741

Overall Inspection:
SATISFACTORY

FIELD INSPECTION FORM

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	<u>335588</u>	<u>335588</u>	<u>LONGWORTH, MIKE</u>	<input type="checkbox"/>	

Operator Information:

OGCC Operator Number:	<u>100185</u>
Name of Operator:	<u>ENCANA OIL & GAS (USA) INC</u>
Address:	<u>370 17TH ST STE 1700</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, General	970-285-2665	cogcc.inspections@encana.com	EnCana Inspection email

Compliance Summary:

QtrQtr:	<u>NESE</u>	Sec:	<u>30</u>	Twp:	<u>5S</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)
12/31/2013	663902579			SATISFACTORY			No

Inspector Comment:

Related Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status	
280381	WELL	PR	02/01/2014	GW	045-11246	N.PARACHUTE EF01B 130 595	PR	<input checked="" type="checkbox"/>
280387	WELL	PR	04/12/2007	GW	045-11251	N.PARACHUTE EF08B 130 595	PR	<input checked="" type="checkbox"/>
280388	WELL	PR	09/17/2008	GW	045-11250	N.PARACHUTE EF 08D 130 595	PR	<input checked="" type="checkbox"/>
280389	WELL	PR	07/20/2006	GW	045-11249	N.PARACHUTE EF 16D I30 595	PR	<input checked="" type="checkbox"/>
280390	WELL	PR	04/19/2007	GW	045-11248	N.PARACHUTE EF16B I30 595	PR	<input checked="" type="checkbox"/>
280391	WELL	PR	06/22/2006	GW	045-11247	N.PARACHUTE EF04B 130 595	PR	<input checked="" type="checkbox"/>
280439	WELL	PR	02/01/2014	GW	045-11252	N.PARACHUTE EF01D-31 I30 59	PR	<input checked="" type="checkbox"/>
280440	WELL	PR	07/21/2006	GW	045-11253	N. PARACHUTE EF01D I30 595	PR	<input checked="" type="checkbox"/>
294239	WELL	PR	07/26/2009	GW	045-15341	N. PARACHUTE EF16C-19 I30 59	PR	<input checked="" type="checkbox"/>
294240	WELL	PR	02/19/2009	GW	045-15342	N. PARACHUTE EF03A-29 I30 59	PR	<input checked="" type="checkbox"/>

294241	WELL	PR	02/24/2009	GW	045-15343	N. PARACHUTE EF05C-29 I30 59	PR	X
294242	WELL	PR	02/11/2009	GW	045-15344	N.PARACHUTE EF12D-29 I30 59	PR	X
294261	WELL	PR	02/20/2009	GW	045-15345	N.PARACHUTE EF13A-29 I30 59	PR	X
294262	WELL	PR	08/11/2009	GW	045-15346	N. PARACHUTE EFO1B-30 I30 59	PR	X
294263	WELL	PR	02/20/2009	GW	045-15347	N.PARACHUTE EF13C-29 I30 59	PR	X
294264	WELL	PR	07/20/2009	GW	045-15348	N. PARACHUTE EF04D-29 I30 59	PR	X
294265	WELL	PR	07/25/2009	GW	045-15349	N. PARACHUTE EF04C-29 I30 59	PR	X
294266	WELL	PR	02/11/2009	GW	045-15350	N. PARACHUTE EF05A-29 I30 59	PR	X
294267	WELL	PR	07/27/2009	GW	045-15351	N.PARACHUTE EF08A-30 I30 59	PR	X
294268	WELL	PR	08/17/2009	GW	045-15352	N.PARACHUTE EF08C-30 I30 59	PR	X
294269	WELL	PR	03/22/2009	GW	045-15353	N.PARACHUTE EF04A-32 I30 59	PR	X
294270	WELL	PR	02/19/2009	GW	045-15354	N.PARACHUTE EF05D-29 I30 59	PR	X
294271	WELL	PR	09/15/2009	GW	045-15355	N. PARACHUTE EF04A-29 I30 59	PR	X
294272	WELL	PR	07/28/2009	GW	045-15356	N. PARACHUTE EF16D-19 I30 59	PR	X
335588	LOCATION	AC	08/06/2015		-	EF I30 595	AC	
442764	PIT	AC	10/31/2013		-	EF I30 595	AC	

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
BATTERY	SATISFACTORY			
WELLHEAD	SATISFACTORY			
CONTAINERS	SATISFACTORY			
TANK LABELS/PLACARDS	SATISFACTORY			

Emergency Contact Number (S/A/V): SATISFACTORY Corrective Date: _____
 Comment: 800-791-7691

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
Gas Meter Run	4	SATISFACTORY			
Plunger Lift	20	SATISFACTORY			
Plunger Lift	4	SATISFACTORY			
Gas Meter Run	20	SATISFACTORY			
Gas Meter Run	4	SATISFACTORY	Gas lift		
Ancillary equipment	4	SATISFACTORY			
Gas Meter Run	20	SATISFACTORY	Gas lift		

Facilities:				
<input type="checkbox"/> New Tank		Tank ID: _____		
Contents	#	Capacity	Type	SE GPS
CONDENSATE	1	<100 BBLs	STEEL AST	,
S/AV:	SATISFACTORY		Comment:	
Corrective Action:				Corrective Date:

Paint

Condition	Adequate
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Other (Content) _____

Other (Capacity) 80 bbls _____

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: 335588

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: 280381 Type: WELL API Number: 045-11246 Status: PR Insp. Status: PR

Producing Well

Comment: **Producing well**

Facility ID: 280387 Type: WELL API Number: 045-11251 Status: PR Insp. Status: PR

Producing Well

Comment: **Producing well**

Facility ID: 280388 Type: WELL API Number: 045-11250 Status: PR Insp. Status: PR

Producing Well

Comment: **Producing well**

Facility ID: 280389	Type: WELL	API Number: 045-11249	Status: PR	Insp. Status: PR
Producing Well				
Comment: Producing well				
Facility ID: 280390	Type: WELL	API Number: 045-11248	Status: PR	Insp. Status: PR
Producing Well				
Comment: Producing well				
Facility ID: 280391	Type: WELL	API Number: 045-11247	Status: PR	Insp. Status: PR
Producing Well				
Comment: Producing well				
Facility ID: 280439	Type: WELL	API Number: 045-11252	Status: PR	Insp. Status: PR
Producing Well				
Comment: Producing well				
Facility ID: 280440	Type: WELL	API Number: 045-11253	Status: PR	Insp. Status: PR
Producing Well				
Comment: Producing well				
Facility ID: 294239	Type: WELL	API Number: 045-15341	Status: PR	Insp. Status: PR
Producing Well				
Comment: Producing well				
Facility ID: 294240	Type: WELL	API Number: 045-15342	Status: PR	Insp. Status: PR
Producing Well				
Comment: Producing well				
Facility ID: 294241	Type: WELL	API Number: 045-15343	Status: PR	Insp. Status: PR
Producing Well				
Comment: Producing well				
Facility ID: 294242	Type: WELL	API Number: 045-15344	Status: PR	Insp. Status: PR
Producing Well				
Comment: Producing well				
Facility ID: 294261	Type: WELL	API Number: 045-15345	Status: PR	Insp. Status: PR
Producing Well				
Comment: Producing well				
Facility ID: 294262	Type: WELL	API Number: 045-15346	Status: PR	Insp. Status: PR
Producing Well				
Comment: Producing well				
Facility ID: 294263	Type: WELL	API Number: 045-15347	Status: PR	Insp. Status: PR

Producing Well

Comment: **Producing well**

Facility ID: 294264 Type: WELL API Number: 045-15348 Status: PR Insp. Status: PR

Producing Well

Comment: **Producing well**

Facility ID: 294265 Type: WELL API Number: 045-15349 Status: PR Insp. Status: PR

Producing Well

Comment: **Producing well**

Facility ID: 294266 Type: WELL API Number: 045-15350 Status: PR Insp. Status: PR

Producing Well

Comment: **Producing well**

Facility ID: 294267 Type: WELL API Number: 045-15351 Status: PR Insp. Status: PR

Producing Well

Comment: **Producing well**

Facility ID: 294268 Type: WELL API Number: 045-15352 Status: PR Insp. Status: PR

Producing Well

Comment: **Producing well**

Facility ID: 294269 Type: WELL API Number: 045-15353 Status: PR Insp. Status: PR

Producing Well

Comment: **Producing well**

Facility ID: 294270 Type: WELL API Number: 045-15354 Status: PR Insp. Status: PR

Producing Well

Comment: **Producing well**

Facility ID: 294271 Type: WELL API Number: 045-15355 Status: PR Insp. Status: PR

Producing Well

Comment: **Producing well**

Facility ID: 294272 Type: WELL API Number: 045-15356 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:
 DWR Receipt Num: _____ Owner Name: _____ GPS : _____ Lat _____ Long _____

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? _____ 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: _____

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
				MHSP	Pass	
Gravel	Pass					
Compaction	Pass					
		Ditches	Pass			
		Check Dams	Pass			
Seeding						
Berms	Pass					
		Culverts	Pass			
		Gravel	Pass			

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

Comment:

CA:

Pits: NO SURFACE INDICATION OF PIT

Permit:	Facility ID	Permit Num	Expiration Date
	442764	1642055	