

**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:

08/25/2015

Document Number:

668003795

Overall Inspection:

SATISFACTORY**FIELD INSPECTION FORM**

| | | | | | |
|---------------------|-------------|--------|-----------------|--------------------------|-------------|
| Location Identifier | Facility ID | Loc ID | Inspector Name: | On-Site Inspection | 2A Doc Num: |
| | 257374 | 333645 | DURAN, JOHN | <input type="checkbox"/> | |

Operator Information:OGCC Operator Number: 10084Name of Operator: PIONEER NATURAL RESOURCES USA INCAddress: 5205 N O'CONNOR BLVD STE 200City: IRVING State: TX Zip: 75039

- ☐ 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 |
|---------------|---------------------------|-------------------------|-----------------|
| HISS, DUANE | 719-845-4394/719-680-0024 | duane.hiss@pxd.com | All Inspections |
| ROYBAL, JAMES | 719-845-4323 | james.roybal@pxd.com | All Inspections |
| Kephart, Jeff | 719-845-4504 | jeff.kephart@pxd.com | UIC Inspections |
| WEBB, JULIE | 616-813-5063 | Julie.Webb@pxd.com | All Inspections |
| Koehler, Bob | | bob.koehler@state.co.us | |

Compliance Summary:QtrQtr: SESW Sec: 15 Twp: 32S Range: 65W

| Insp. Date | Doc Num | Insp. Type | Insp Status | Satisfactory /Action Required | PA P/F/I | Pas/Fail (P/F) | Violation (Y/N) |
|------------|-----------|------------|-------------|-------------------------------|----------|----------------|-----------------|
| 06/19/2014 | 668002259 | IJ | AC | SATISFACTORY | P | | No |
| 06/06/2013 | 668001308 | IJ | AC | SATISFACTORY | P | | No |
| 08/01/2012 | 668000488 | IJ | IJ | SATISFACTORY | | | No |
| 06/28/2011 | 200314169 | MI | AC | SATISFACTORY | | | No |
| 08/25/2010 | 200268283 | RT | AC | SATISFACTORY | | | No |
| 06/22/2009 | 200213460 | RT | AC | SATISFACTORY | | | No |
| 07/09/2008 | 200192244 | RT | AC | SATISFACTORY | | | No |
| 08/20/2007 | 200117547 | RT | AC | SATISFACTORY | | | No |
| 07/27/2006 | 200094719 | MI | SI | SATISFACTORY | | Pass | No |
| 07/11/2006 | 200094292 | MI | AC | ACTION REQUIRED | | Fail | Yes |
| 08/08/2005 | 200074959 | RT | AC | SATISFACTORY | | Pass | No |
| 07/09/2004 | 200058225 | RT | AC | SATISFACTORY | | Pass | No |
| 08/05/2003 | 200042403 | RT | AC | SATISFACTORY | | Pass | No |
| 09/03/2002 | 200030150 | RT | AC | SATISFACTORY | | Pass | No |
| 08/07/2001 | 200018869 | MI | AC | SATISFACTORY | I | Pass | No |

Inspector Comment:

Related Facilities:

| Facility ID | Type | Status | Status Date | Well Class | API Num | Facility Name | Insp Status | |
|-------------|--------------|--------|-------------|------------|-----------|------------------|-------------|-------------------------------------|
| 159061 | UIC DISPOSAL | AC | 07/25/2001 | | - | BEARDON 24-15 WD | AC | <input checked="" type="checkbox"/> |
| 257374 | WELL | IJ | 06/15/2001 | SI | 071-07016 | BEARDON 24-15 WD | AC | <input checked="" type="checkbox"/> |
| 259326 | WELL | PR | 06/17/2003 | GW | 071-07239 | BEARDON 24-15V | PR | <input type="checkbox"/> |
| 260851 | PIT | AC | 07/26/2001 | | - | BEARDON V 24-15 | AC | <input type="checkbox"/> |
| 282337 | PIT | AC | 12/30/2005 | | - | BEARDON 24-15 WD | AC | <input type="checkbox"/> |

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 |
|----------------------|------------------------------|---------|-------------------|---------|
| TANK LABELS/PLACARDS | SATISFACTORY | | | |
| WELLHEAD | SATISFACTORY | | | |

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

Corrective Date: _____

Comment: _____

Corrective Action: _____

Spills:

| Type | Area | Volume | Corrective action | CA Date |
|------|------|--------|-------------------|---------|
|------|------|--------|-------------------|---------|

☐ Multiple Spills and Releases?**Equipment:**

| Type | # | Satisfactory/Action Required | Comment | Corrective Action | CA Date |
|---------------------|---|------------------------------|------------------------|-------------------|---------|
| Ancillary equipment | 1 | SATISFACTORY | Wellhead and pipeline. | | |

Facilities:☐ New Tank

Tank ID: _____

| Contents | # | Capacity | Type | SE GPS |
|---------------------|-------------------------|----------|-----------|------------------|
| PRODUCED WATER | 2 | OTHER | STEEL AST | , |
| S/A/V: SATISFACTORY | Comment: 2 - 800 bbl ST | | | |
| Corrective Action: | | | | Corrective Date: |

Paint

| Condition | Adequate |
|-----------|----------|
|-----------|----------|

Inspector Name: DURAN, JOHN

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 | |
| Comment | | | |

| | | |
|------------------------|---------|--|
| <u>Venting:</u> | | |
| Yes/No | Comment | |
| | | |

| | | | | |
|------------------------|------------------------------|---------|-------------------|---------|
| <u>Flaring:</u> | | | | |
| Type | Satisfactory/Action Required | Comment | Corrective Action | CA Date |
| | | | | |

Predrill

Location ID: 257374

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: 159061 Type: UIC API Number: - Status: AC Insp. Status: AC

Facility ID: 257374 Type: WELL API Number: 071-07016 Status: IJ Insp. Status: AC

Underground Injection Control

UIC Violation: _____

Maximum Injection Pressure: _____ 320

UIC RoutineInj./Tube: Pressure or inches of Hg -18" Hg
(e.g. 30 psig or -30" Hg)Previous Test Pressure _____ MPP _____
Inj Zone: DK-PR

TC: Pressure or inches of Hg 1 psig

Previous Test Pressure _____ Last MIT: 06/28/2011

Brhd: Pressure or inches of Hg 1 psig

Previous Test Pressure _____ AnnMTReq: NO

Comment: _____

Method of Injection: GRAVITY FEED

Test Type: _____ Tbg psi: _____ Csg psi: _____ BH psi: _____

Insp. Status: _____

Comment: _____

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? _____ 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 REVEGETATIONCropland

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 |
|------------------|-----------------|-------------------------|-----------------------|---------------|--------------------------|---------|
| Gravel | Pass | Gravel | Pass | | | |

Inspector Name: DURAN, JOHN

S/A/V: SATISFACTOR

Corrective Date: _____

Y

Comment: _____

CA: _____

Pits: ☐ NO SURFACE INDICATION OF PIT

Pit Type: Produced Water Lined: NO Pit ID: _____ Lat: _____ Long: _____

Lining:

Liner Type: _____ Liner Condition: _____

Comment: _____

Fencing:

Fencing Type: _____ Fencing Condition: _____

Comment: _____

Netting:

Netting Type: _____ Netting Condition: _____

Comment: _____

Anchor Trench Present: _____ Oil Accumulation: NO 2+ feet Freeboard: _____

Pit (S/A/V): SATISFACTOR Comment: 30' x 120'

Corrective Action: _____ Date: _____

| | | | |
|---------|-------------|------------|-----------------|
| Permit: | Facility ID | Permit Num | Expiration Date |
| | 260851 | 851580 | |
| | 282337 | 1393016 | |

| | | |
|-------------|-----------------|---------|
| Monitoring: | Monitoring Type | Comment |
| | Chain | |

COGCC Comments

| | | |
|-------------------------|--------|------------|
| Comment | User | Date |
| Next MiT on (06/28/16). | duranj | 08/27/2015 |