

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:
12/23/2015

Document Number:
675102055

Overall Inspection:
SATISFACTORY

FIELD INSPECTION FORM

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	<u>335962</u>	<u>335962</u>	<u>GRANAHAN, KYLE</u>	<input type="checkbox"/>	

Operator Information:

OGCC Operator Number:	<u>100264</u>
Name of Operator:	<u>XTO ENERGY INC</u>
Address:	<u>382 CR 3100</u>
City:	<u>AZTEC</u> State: <u>NM</u> Zip: <u>87410</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
Dooling, Jessica		Jessica_Dooling@xtoenergy.com	Piceance Creek insp

Compliance Summary:

QtrQtr: NESW Sec: 36 Twp: 1S Range: 97W

Inspector Comment:

Related Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status	
294503	WELL	PR	12/15/2011	GW	103-11180	PICEANCE CREEK UNIT 197-36A1	PR	<input checked="" type="checkbox"/>
294504	WELL	PR	10/27/2011	GW	103-11181	PICEANCE CREEK 197-36A2	PR	<input checked="" type="checkbox"/>
294505	WELL	PR	07/01/2015	GW	103-11182	PICEANCE CREEK UNIT 197-36A3	PR	<input checked="" type="checkbox"/>
294506	WELL	PR	10/27/2011	GW	103-11183	PICEANCE CREEK UNIT 197-36A4	PR	<input checked="" type="checkbox"/>
294507	WELL	PR	12/15/2011	GW	103-11184	PICEANCE CREEK UNIT 197-36A5	PR	<input checked="" type="checkbox"/>
294508	WELL	PR	07/01/2015	GW	103-11185	PICEANCE CREEK UNIT 197-36A6	PR	<input checked="" type="checkbox"/>
294509	WELL	PR	03/01/2013	GW	103-11186	PICEANCE CREEK UNIT 197-36A7	PR	<input checked="" type="checkbox"/>
294510	WELL	PR	12/15/2011	GW	103-11187	PICEANCE CREEK UNIT 197-36A8	PR	<input checked="" type="checkbox"/>
294511	WELL	PR	12/15/2011	GW	103-11188	PICEANCE CREEK UNIT 197-36A9	PR	<input checked="" type="checkbox"/>
294512	WELL	PR	11/04/2011	GW	103-11189	PICEANCE CREEK UNIT 197-36A10	PR	<input checked="" type="checkbox"/>
294701	PIT	AC	02/26/2008		-	PCU 197-36	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
BATTERY	SATISFACTORY			
CONTAINERS	SATISFACTORY			
WELLHEAD	SATISFACTORY			

Emergency Contact Number (S/A/V): SATISFACTORY Corrective Date: _____

Comment: 970-675-4117

Corrective Action: _____

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

Fencing/:				
Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
LOCATION	SATISFACTORY			

Equipment:				
Type: Ancillary equipment	# 4	Satisfactory/Action Required:	SATISFACTORY	
Comment	Methanol injection totes w/secondary containment			
Corrective Action				Date:
Type: Gas Meter Run	# 1	Satisfactory/Action Required:	SATISFACTORY	
Comment				
Corrective Action				Date:
Type: Horizontal Heated Separator	# 1	Satisfactory/Action Required:	SATISFACTORY	
Comment				
Corrective Action				Date:

Venting:	
Yes/No	NO
Comment	

Flaring:	
Type	Satisfactory/Action Required
Comment:	

Corrective Action:	Correct Action Date:
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Predrill

Location ID: 335962

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

S/AV: _____
 Corrective Action: _____ Date: _____ CDP Num.: _____

Form 2A COAs:
 Data retrieval failed for the subreport 'Subreport1' located at: \\10.12.100.15\c\FormReports\Insp\InspCOA.rdl. Please check t

S/AV: _____ **Comment:** _____

CA: _____ **Date:** _____

Wildlife BMPs:
 Data retrieval failed for the subreport 'Subreport2' located at: \\10.12.100.15\c\FormReports\Insp\InspBMP.rdl. Please check t

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: 294503 Type: WELL API Number: 103-11180 Status: PR Insp. Status: PR

Producing Well

Comment: PR

Facility ID: 294504 Type: WELL API Number: 103-11181 Status: PR Insp. Status: PR

Producing Well

Comment: PR

Facility ID: 294505 Type: WELL API Number: 103-11182 Status: PR Insp. Status: PR

Producing Well

Comment: PR

Facility ID: 294506 Type: WELL API Number: 103-11183 Status: PR Insp. Status: PR

Producing Well

Comment: PR

Facility ID: 294507 Type: WELL API Number: 103-11184 Status: PR Insp. Status: PR

Producing Well

Comment: PR

Facility ID: 294508 Type: WELL API Number: 103-11185 Status: PR Insp. Status: PR

Producing Well

Comment: PR

Facility ID: 294509 Type: WELL API Number: 103-11186 Status: PR Insp. Status: PR

Producing Well

Comment: PR

Facility ID: 294510 Type: WELL API Number: 103-11187 Status: PR Insp. Status: PR

Producing Well

Comment: PR

Facility ID: 294511 Type: WELL API Number: 103-11188 Status: PR Insp. Status: PR

Producing Well

Comment: PR

Facility ID: 294512 Type: WELL API Number: 103-11189 Status: PR Insp. Status: PR

Producing Well

Comment: PR

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? Pass 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? Pass Production areas stabilized ? Pass

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	
Compaction	Pass					
		Compaction	Pass			

S/A/V: SATISFACTOR Corrective Date: _____

Y _____

Comment: Snow cover present - no sediment flow evident

CA: _____

Pits: NO SURFACE INDICATION OF PIT

Permit:	Facility ID	Permit Num	Expiration Date
	294701	1433808	
	294701	1433808	