

**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

Inspection Date:

05/05/2016

Document Number:

666802116

Overall Inspection:

SATISFACTORY**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	293459	334613	Murray, Richard	<input type="checkbox"/>	

Operator Information:OGCC Operator Number: 100185Name of Operator: ENCANA OIL & GAS (USA) INCAddress: 370 17TH ST STE 1700City: 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: NWSW Sec: 25 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)
06/04/2008	200192111	PR	PR	SATISFACTORY			No

Inspector Comment:**Related Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status	
271441	WELL	PR	07/11/2004	GW	045-09880	SHIDELER 25-12 (L25W)	PR	<input checked="" type="checkbox"/>
271446	WELL	PR	07/07/2004	GW	045-09885	SHIDELER 25-14 (L25W)	PR	<input checked="" type="checkbox"/>
281337	WELL	PR	08/10/2007	GW	045-11431	SHIDELER 25-14D (L25W)	PR	<input checked="" type="checkbox"/>
281339	WELL	PR	05/13/2010	GW	045-11432	SHIDELER 25-13(L25W)	PR	<input checked="" type="checkbox"/>
290408	WELL	PR	08/04/2007	GW	045-14108	SHIDELER 25-14A (L25W)	PR	<input checked="" type="checkbox"/>
290409	WELL	PR	08/13/2007	GW	045-14107	SHIDELER 25-12C (L25W)	PR	<input checked="" type="checkbox"/>
293457	WELL	PR	07/06/2008	GW	045-15000	SHIDELER 25-6 (L25W)	PR	<input checked="" type="checkbox"/>
293458	WELL	PR	07/02/2008	GW	045-15001	SHIDELER 25-6C (L25W)	PR	<input checked="" type="checkbox"/>
293459	WELL	PR	07/02/2008	GW	045-15002	SHIDELER 25-11D (L25W)	PR	<input checked="" type="checkbox"/>
293613	WELL	PR	07/19/2008	GW	045-15070	SHIDELER FEDERAL 25-5C (L25W)	PR	<input checked="" type="checkbox"/>

294006	WELL	PR	12/19/2007	GW	045-15198	SHIDELER FEDERAL 26-8C1 (L25W)	PR	<input checked="" type="checkbox"/>
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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**Lease Road:**

Type	Satisfactory/Action Required	comment	Corrective Action	Date

Signs/Marker:

Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
BATTERY	SATISFACTORY	AIRS ID 045-1767-001		

Emergency Contact Number (S/AR): SATISFACTORY

Corrective Date: _____

Comment: _____

Corrective Action: _____

Good Housekeeping:

Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date

Spills:

Type	Area	Volume	Corrective action	CA Date
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☐ Multiple Spills and Releases?**Fencing/:**

Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date

Equipment:

Type: Pig Station	# 11	Satisfactory/Action Required:	SATISFACTORY
Comment			
Corrective Action			Date: _____
Type: Vertical Heated Separator	# 7	Satisfactory/Action Required:	SATISFACTORY
Comment			
Corrective Action			Date: _____
Type: Horizontal Heated Separator	# 4	Satisfactory/Action Required:	SATISFACTORY

Inspector Name: Murray, Richard

Comment			
Corrective Action		Date:	
Type: Emission Control Device	# 1	Satisfactory/Action Required:	SATISFACTORY
Comment			
Corrective Action		Date:	
Type: Gas Meter Run	# 1	Satisfactory/Action Required:	SATISFACTORY
Comment			
Corrective Action		Date:	

Facilities: ☐ New Tank Tank ID: _____

Contents	#	Capacity	Type	SE GPS
METHANOL	1	1000 GAL	STEEL AST	,
S/AR	SATISFACTORY		Comment: Centralized battery	
Corrective Action:			Corrective Date:	

Paint

Condition	Adequate
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Other (Content) _____

Other (Capacity) _____

Other (Type) _____

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Corrective Action			Corrective Date	
Comment				

Facilities: ☐ New Tank Tank ID: _____

Contents	#	Capacity	Type	SE GPS
CONDENSATE	2	300 BBLS	STEEL AST	,
S/AR	SATISFACTORY		Comment: Centralized battery	
Corrective Action:			Corrective Date:	

Paint

Condition	Adequate
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Other (Content) _____

Other (Capacity) _____

Other (Type) _____

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Corrective Action			Corrective Date	
Comment				

Facilities: ☐ New Tank Tank ID: _____

Contents	#	Capacity	Type	SE GPS
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Inspector Name: Murray, Richard

CONDENSATE		2	500 BBLS	STEEL AST	39.414731,-107.728942		
S/AR	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 Sufficient	Base Sufficient	Adequate		
Corrective Action					Corrective Date	
Comment						

Venting:

Yes/No	NO
Comment	

Flaring:

Type		Satisfactory/Action Required	
Comment:			
Corrective Action:		Correct Action Date:	

Predrill

Location ID: 293459

Lease Road Adeq.: _____

Pads: _____

Soil Stockpile: _____

S/AR: _____

Corrective Action: _____

Date: _____ CDP Num.: _____

Form 2A COAs:**S/AR:** _____ **Comment:** _____**CA:** _____ **Date:** _____**Wildlife BMPs:****S/AR:** _____ **Comment:** _____**CA:** _____ **Date:** _____**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: 271441 Type: WELL API Number: 045-09880 Status: PR Insp. Status: PR

Producing Well

Comment: Plunger lift

Facility ID: 271446 Type: WELL API Number: 045-09885 Status: PR Insp. Status: PR

Producing Well

Comment: Plunger lift

Facility ID: 281337 Type: WELL API Number: 045-11431 Status: PR Insp. Status: PR

Producing Well

Comment: Plunger lift

Facility ID: 281339 Type: WELL API Number: 045-11432 Status: PR Insp. Status: PR

Inspector Name: Murray, Richard

Producing Well

Comment: **Plunger lift**

Facility ID: 290408 Type: WELL API Number: 045-14108 Status: PR Insp. Status: PR

Producing Well

Comment: **Plunger lift**

Facility ID: 290409 Type: WELL API Number: 045-14107 Status: PR Insp. Status: PR

Producing Well

Comment: **Plunger lift**

Facility ID: 293457 Type: WELL API Number: 045-15000 Status: PR Insp. Status: PR

Producing Well

Comment: **Plunger lift**

Facility ID: 293458 Type: WELL API Number: 045-15001 Status: PR Insp. Status: PR

Producing Well

Comment: **Plunger lift**

Facility ID: 293459 Type: WELL API Number: 045-15002 Status: PR Insp. Status: PR

Producing Well

Comment: **Plunger lift**

Facility ID: 293613 Type: WELL API Number: 045-15070 Status: PR Insp. Status: PR

Producing Well

Comment: **Plunger lift**

Facility ID: 294006 Type: WELL API Number: 045-15198 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:

Lat Long

DWR Receipt Num: Owner Name: GPS :

Field Parameters:

Sample Location:

Inspector Name: Murray, Richard

Emission Control Burner (ECB): N

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:

Comment: inprocess

1003a. Waste and Debris removed? 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 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:

Inspector Name: Murray, Richard

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 <input type="checkbox"/>	Multi-Well Location <input type="checkbox"/>

Storm Water:

Loc Erosion BMPs	BMP Maintenance	Lease Road Erosion BMPs	Lease BMP Maintenance	Chemical BMPs	Chemical BMP Maintenance	Comment
Ditches	Pass					
		Rip Rap	Pass			
Seeding	Pass					
Berms	Pass					
Retention Ponds	Pass					
		Sediment Traps	Pass			
		Ditches	Pass			
		Culverts	Pass			
		Gravel	Pass			

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

Comment: _____

CA: _____

Pits: ☒ NO SURFACE INDICATION OF PIT