

**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:

07/19/2016

Document Number:

668004618

Overall Inspection:

SATISFACTORY**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection <input type="checkbox"/>
	217642	307421	DURAN, JOHN	2A Doc Num: _____

**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
Distribution, Pioneer	972-444-9001	COGCC.Inspections@pxd.com	All Inspections
Koehler, Bob		bob.koehler@state.co.us	

**Compliance Summary:**QtrQtr: SWNW Sec: 4 Twp: 34S Range: 65W

Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Action Required	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
08/24/2015	668003785	SI	AC	SATISFACTORY			No
06/20/2014	668002272	IJ	AC	SATISFACTORY	P		No
06/05/2013	668001303	IJ	AC	SATISFACTORY	P		No
08/01/2012	668000493	IJ	IJ	SATISFACTORY			No
08/30/2011	200320373	MI	AC	SATISFACTORY			No
06/27/2011	200314148	RT	AC	SATISFACTORY			No
08/12/2010	200267304	RT	AC	SATISFACTORY			No
06/23/2009	200213469	RT	AC	SATISFACTORY			No
09/23/2008	200195678	MI	SI	SATISFACTORY			No
08/29/2008	200194391	MI	SI	ACTION REQUIRED			Yes
08/20/2007	200117540	RT	AC	SATISFACTORY			No
03/26/2007	200107573	ES	UN	ACTION REQUIRED		Pass	No
07/12/2006	200094308	RT	AC	SATISFACTORY		Pass	No
08/08/2005	200074951	RT	AC	SATISFACTORY		Pass	No
07/09/2004	200058227	RT	AC	SATISFACTORY		Pass	No
09/26/2003	200046105	CO	AO	SATISFACTORY		Pass	No
08/04/2003	200042396	MI	AC	SATISFACTORY		Pass	No
10/16/2002	200031354	CO	NF	SATISFACTORY		Pass	No
09/04/2002	200031353	CO	AO	SATISFACTORY		Pass	No

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09/03/2002	200030154	RT	AC	SATISFACTORY		Pass	No
07/03/2002	200031352	CO	AO	SATISFACTORY		Pass	No
10/24/2001	200021055	CO	AC	ACTION REQUIRED			
10/10/2001	200020732	RT	AC	SATISFACTORY		Pass	No
08/07/2001	200018874	RT	AC	SATISFACTORY	I	Pass	No
08/31/2000	200009322	RT	AC	SATISFACTORY	I	Pass	No
10/18/1999	500151943	PR	AC			Pass	No
03/13/1998	500151942	PR	AC			Fail	Yes

**Inspector Comment:****Related Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status	
150411	UIC DISPOSAL	AC	05/23/1997		-	PCW 4-5 SWDW	AC	<input type="checkbox"/>
217642	WELL	SI	11/07/2014	DSPW	071-06421	PCW 12-4 WD	SI	<input checked="" 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****Lease Road:**

Type	Satisfactory/Action Required	comment	Corrective Action	Date

**Signs/Marker:**

Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
TANK LABELS/PLACARDS	SATISFACTORY			
WELLHEAD	SATISFACTORY			

Emergency Contact Number (S/AR): SATISFACTORY

Corrective Date: \_\_\_\_\_

Comment: \_\_\_\_\_

Corrective Action: \_\_\_\_\_

**Good Housekeeping:**

Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date

**Spills:**

Inspector Name: DURAN, JOHN

Type	Area	Volume	Corrective action	CA Date
<input type="checkbox"/> Multiple Spills and Releases?				
<b>Fencing/:</b>				
Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
<b>Equipment:</b>				
Type: Ancillary equipment	# 1	Satisfactory/Action Required:	SATISFACTORY	
Comment	Wellhead and pipeline. Widow Woman Compressor Station.			
Corrective Action				Date:
<b>Facilities:</b> <input type="checkbox"/> New Tank     Tank ID: _____				
Contents	#	Capacity	Type	SE GPS
PRODUCED WATER	1	OTHER	FIBERGLASS AST	,
S/AR	SATISFACTORY	Comment:	1 - 800 bbl FGWT	
Corrective Action:				Corrective Date:
<b>Paint</b>				
Condition	Adequate			
Other (Content)				
Other (Capacity)				
Other (Type)				
<b>Berms</b>				
Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Metal	Adequate	Walls Sufficient	Base Sufficient	Adequate
Corrective Action				Corrective Date:
Comment				
<b>Facilities:</b> <input type="checkbox"/> New Tank     Tank ID: _____				
Contents	#	Capacity	Type	SE GPS
PRODUCED WATER	2	1000 BBLS	FIBERGLASS AST	,
S/AR	SATISFACTORY	Comment:		
Corrective Action:				Corrective Date:
<b>Paint</b>				
Condition	Adequate			
Other (Content)				
Other (Capacity)				
Other (Type)				
<b>Berms</b>				
Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Earth	Adequate	Walls Sufficient	Base Sufficient	Adequate
Corrective Action				Corrective Date:
Comment				

**Venting:**

Yes/No

Comment

**Flaring:**

Type

Satisfactory/Action Required

Comment:

Corrective Action:

Correct Action

Date:

**Predrill**

Location ID: 217642

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: 217642

Type:

WELL

API Number:

071-06421

Status:

SI

Insp. Status:

SI

**Underground Injection Control**

UIC Violation: \_\_\_\_\_

Maximum Injection Pressure: \_\_\_\_\_

**UIC Routine**

Inj./Tube: Pressure or inches of Hg \_\_\_\_\_ Previous Test Pressure \_\_\_\_\_ MPP \_\_\_\_\_  
 (e.g. 30 psig or -30" Hg) Inj Zone: DKTA

TC: Pressure or inches of Hg \_\_\_\_\_ Previous Test Pressure \_\_\_\_\_ Last MIT: 08/30/2011

Brhd: Pressure or inches of Hg \_\_\_\_\_ Previous Test Pressure \_\_\_\_\_ AnnMTReq: YES

Comment: \_\_\_\_\_

Method of Injection: GRAVITY FEED

Test Type: Verification of Repairs Tbg psi: \_\_\_\_\_ Csg psi: 480 BH psi: \_\_\_\_\_

Insp. Status: Pass

Comment: Tbg psi : Shut In. BH psi : Not possible. Cement squeeze for CSG and replace packer. Pressured up T-C Ann. to 480 psig. Pressure held for 15 min. with no pressure loss.

**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. Waste and Debris removed? \_\_\_\_\_

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 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
Gravel	Pass	Gravel	Pass			

Inspector Name: DURAN, JOHN

S/A/V: SATISFACTOR  
Y

Corrective Date: \_\_\_\_\_

Comment: \_\_\_\_\_

CA: \_\_\_\_\_

Pits: ☒ NO SURFACE INDICATION OF PIT

#### COGCC Comments

Comment	User	Date
Next MiT on (07/19/21).	duranj	07/20/2016

#### Attached Documents

You can go to COGCC Images (<https://cogcc.state.co.us/weblink/>) and search by document number:

Document Num	Description	URL
668004618	INSPECTION APPROVED	<a href="http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3909085">http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3909085</a>