

**FORM
INSP**

Rev
X/15

**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:
12/31/2016
Submitted Date:
01/03/2017
Document Number:
666802838

FIELD INSPECTION FORM

Loc ID 323940 Inspector Name: Murray, Richard On-Site Inspection 2A Doc Num: _____

Status Summary:
 THIS IS A FOLLOW UP INSPECTION
 FOLLOW UP INSPECTION REQUIRED
 NO FOLLOW UP INSPECTION REQUIRED

Operator Information:
OGCC Operator Number: 100185
Name of Operator: ENCANA OIL & GAS (USA) INC
Address: 370 17TH ST STE 1700
City: DENVER State: CO Zip: 80202-

Findings:
3 Number of Comments
0 Number of Corrective Actions
 Corrective Action Response Requested

Contact Information:

Contact Name	Phone	Email	Comment
Contact, General		cogcc.inspections@encana.com	

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
211314	WELL	PR	11/07/1998	GW	045-07073	PITMAN 18-8 (H18E)	PR

General Comment:

Location

Overall Good:

Emergency Contact Number:

Comment:

Corrective Action:

Date: _____

Overall Good:

Spills:

Type	Area	Volume			

In Containment: No

Comment:

Multiple Spills and Releases?

Equipment:

Type: Horizontal Heated Separator

1

corrective date

Comment:

Corrective Action:

Date:

Type: Gas Meter Run

1

Comment:

Corrective Action:

Date:

Type: Plunger Lift

1

Comment:

Corrective Action:

Date:

Tanks and Berms:

Contents	#	Capacity	Type	Tank ID	SE GPS
PRODUCED WATER	0				

Comment:

Corrective Action:

Date:

Paint

Condition:

Other (Content):

Other (Capacity):

Other (Type):

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance

Comment:

Corrective Action:

Date:

Contents	#	Capacity	Type	Tank ID	SE GPS
CONDENSATE	1	300 BBLS	STEEL AST		39.448784,-107.703840

Comment:

Corrective Action:	Date:
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Paint

Condition	Adequate		
Other (Content)			
Other (Capacity)			
Other (Type)			

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance	
Metal	Adequate	Walls Sufficient	Base Sufficient	Adequate	
Comment:					
Corrective Action:					Date:

Contents	#	Capacity	Type	Tank ID	SE GPS	
METHANOL	1	OTHER	STEEL AST			
Comment:	Centralized battery					
Corrective Action:					Date:	

Paint

Condition	Adequate		
Other (Content)			
Other (Capacity)	500gal		
Other (Type)			

Berms

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

Venting:

Yes/No	NO		
Comment:			
Corrective Action:			Date:

Flaring:

Type			
Comment:			
Corrective Action:			Date:

Inspected Facilities

Facility ID: 211314 Type: WELL API Number: 045-07073 Status: PR Insp. Status: PR

Producing Well

Comment: [Plunger lift](#)

Corrective Action:

Date:

Environmental

Spill/Remediation:

Comment:

Corrective Action: Date:

Emission Control Burner (ECB): NO

Comment:

Pilot: Wildlife Protection Devices (fired vessels): YES

Reclamation - Storm Water - Pit

Storm Water:

Loc Erosion BMPs	BMP Maintenance	Lease Road Erosion BMPs	Lease BMP Maintenance	Chemical BMPs	Chemical BMP Maintenance	Comment
		Ditches	Pass			
Seeding	Pass					
Ditches	Pass					
		Culverts	Pass			

Comment:

Corrective Action:

Date: _____

Pits: NO SURFACE INDICATION OF PIT