

FORM  
INSPRev  
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:

06/19/2017

Submitted Date:

06/22/2017

Document Number:

687900056

### FIELD INSPECTION FORM

Loc ID 334130 Inspector Name: DURAN, JOHN On-Site Inspection  2A Doc Num: \_\_\_\_\_

**Operator Information:**

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

**Status Summary:**

- THIS IS A FOLLOW UP INSPECTION  
 FOLLOW UP INSPECTION REQUIRED  
 NO FOLLOW UP INSPECTION REQUIRED

**Findings:**

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

**Contact Information:**

Contact Name	Phone	Email	Comment
Distribution, Pioneer	972-444-9001	COGCC.Inspections@pxd.com	<a href="#">All Inspections</a>

**Inspected Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
290786	WELL	PR	05/01/2008	GW	071-09304	PUCKETT 33-29 TR	PR
290787	WELL	PR	11/12/2007	GW	071-09303	PUCKETT 33-29	PR

**General Comment:**

**Location**

Overall Good:

**Signs/Marker:**

Type	WELLHEAD		
Comment:			
Corrective Action:		Date:	

Emergency Contact Number:

Comment:

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

Overall Good:

**Spills:**

Type	Area	Volume		
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In Containment: No

Comment:

Multiple Spills and Releases?

**Fencing/:**

Type	PUMP JACK		
Comment:			
Corrective Action:		Date:	

**Equipment:**

Type			corrective date
Type: Gas Meter Run	# 2		
Comment:			
Corrective Action:		Date:	
Type: Deadman # & Marked	# 8		
Comment:			
Corrective Action:		Date:	
Type: Vertical Separator	# 2		
Comment:			
Corrective Action:		Date:	
Type: Compressor	# 1		
Comment:			
Corrective Action:		Date:	
Type: Progressive Cavity	# 1		
Comment:			
Corrective Action:		Date:	
Type: Pump Jack	# 2		
Comment:			
Corrective Action:		Date:	

**Venting:**

Yes/No			
Comment:			
Corrective Action:		Date:	

**Flaring:**

Type			
Comment:			
Corrective Action:		Date:	

**Inspected Facilities**

Facility ID: 290786 Type: WELL API Number: 071-09304 Status: PR Insp. Status: PR

**Producing Well**

Comment: PR

Corrective Action:

Date:

Facility ID: 290787 Type: WELL API Number: 071-09303 Status: PR Insp. Status: PR

**Producing Well**

Comment: PR

Corrective Action:

Date:

**Reclamation - Storm Water - Pit**

**Storm Water:**

Loc Erosion BMPs	BMP Maintenance	Lease Road Erosion BMPs	Lease BMP Maintenance	Chemical BMPs	Chemical BMP Maintenance	Comment
Gravel	Pass	Gravel	Pass			

Comment:

Corrective Action:

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

**Pits:**     NO SURFACE INDICATION OF PIT

Permit:	Facility ID	Permit Num	Expiration Date
	411944	1943296	