

**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:

07/21/2017

Submitted Date:

07/25/2017

Document Number:

687900165**FIELD INSPECTION FORM**Loc ID 307653 Inspector Name: DURAN, JOHN On-Site Inspection ☐ 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**Status Summary:**

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

**Findings:**8 Number of Comments0 Number of Corrective Actions☐ Corrective Action Response Requested**Contact Information:**

Contact Name	Phone	Email	Comment
Koehler, Bob		bob.koehler@state.co.us	
Wiseman, Jack	719-845-4392/719-680-7977	jack.wiseman@pxd.com	<a href="#">UIC Inspections</a>
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
89162	WELL	IJ	02/01/2017	DSPW	071-06741	WILD BOAR 21-32 WD	AC

**General Comment:**

**Location**Overall Good: ☒

<b>Signs/Marker:</b>			
Type	TANK LABELS/PLACARDS		
Comment:			
Corrective Action:		Date:	
Type	WELLHEAD		
Comment:			
Corrective Action:		Date:	

Emergency Contact Number:

Comment:

Corrective Action:  Date:

Overall Good: ☒

<b>Spills:</b>				
Type	Area	Volume		

In Containment: No

Comment: ☐ Multiple Spills and Releases?

<b>Fencing/:</b>			
Type	PIT		
Comment:	Barb wire		
Corrective Action:		Date:	

<b>Equipment:</b>			corrective date
Type: Deadman # & Marked	# 5		
Comment:			
Corrective Action:		Date:	
Type: Ancillary equipment	# 1		
Comment:	Wehellhead and plumbing.		
Corrective Action:		Date:	

**Tanks and Berms:**

Contents	#	Capacity	Type	Tank ID	SE GPS
PRODUCED WATER	1	400 BBLS	STEEL AST		,
Comment:					
Corrective Action:					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		
Comment:						
Corrective Action:				Date:		
Contents	#	Capacity	Type	Tank ID	SE GPS	
PRODUCED WATER	1	<100 BBLs	FIBERGLASS AST		,	
Comment: 1 - 50 bbl FGWT						
Corrective Action:				Date:		
Paint						
Condition						
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	
PRODUCED WATER	1	200 BBLs	STEEL AST		,	
Comment:						
Corrective Action:				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		
Comment:						
Corrective Action:				Date:		
Contents	#	Capacity	Type	Tank ID	SE GPS	
PRODUCED WATER	2	OTHER	STEEL AST		,	
Comment: 2 - 800 bbl ST						
Corrective Action:				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	
Comment:					
Corrective Action:				Date:	

**Venting:**

Yes/No			
Comment:			
Corrective Action:		Date:	

**Flaring:**

Type		
Comment:		
Corrective Action:		Date:

**Inspected Facilities**Facility ID: 89162 Type: WELL API Number: 071-06741 Status: IJ Insp. Status: AC**Underground Injection Control**UIC Violation: \_\_\_\_\_ Maximum Injection Pressure: 700UIC Routine

Inj./Tube: Pressure or inches of Hg -8" Hg Previous Test Pressure \_\_\_\_\_ MPP \_\_\_\_\_  
(e.g. 30 psig or -30" Hg) Inj Zone: DK-PR

TC: Pressure or inches of Hg 1 psig Previous Test Pressure \_\_\_\_\_ Last MIT: 09/12/2014

Brhd: Pressure or inches of Hg 0 psig Previous Test Pressure \_\_\_\_\_ AnnMTReq: \_\_\_\_\_

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

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

Method of Injection: GRAVITY FEED

Test Type: \_\_\_\_\_ Tbg psi: \_\_\_\_\_ Csg psi: \_\_\_\_\_ BH psi: \_\_\_\_\_

Insp. Status: \_\_\_\_\_

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

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 PITType: Produced WaterLined: YES

Pit ID:

Lat:

Long:

Reference Point: \_\_\_\_\_

Other: \_\_\_\_\_

Length: \_\_\_\_\_

Width: \_\_\_\_\_

**Lining:**Liner Type: PlasticLiner Condition: Adequate

Comment:

Corrective Action

Date: c**Fencing:**Fencing Type: LivestockFencing Condition: Adequate

Comment:

Corrective Action

Date:

**Netting:**

Netting Type:

Netting Condition:

Comment:

Corrective Action

Date:

Anchor Trench Present:

Oil Accumulation: NO2+ feet Freeboard: YESComment: 60' x 70'

Corrective Action

Date:

Permit:	Facility ID	Permit Num	Expiration Date
	282341	1393008	

Monitoring:

Monitoring Type

Comment`

Chain

**COGCC Comments**

Comment

User

Date

Next MiT on (08/31/2019).

duranj

07/25/2017