

FORM  
INSPRev  
X/15

## State of Colorado Oil and Gas Conservation Commission

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Phone: (303) 894-2100 Fax: (303) 894-2109



Inspection Date:

09/06/2017

Submitted Date:

09/14/2017

Document Number:

687900321

### FIELD INSPECTION FORM

Loc ID 312082 Inspector Name: DURAN, JOHN On-Site Inspection  2A Doc Num: \_\_\_\_\_

**Operator Information:**OGCC Operator Number: 100264Name of Operator: XTO ENERGY INCAddress: PO BOX 6501City: ENGLEWOOD State: CO Zip: 80155**Status Summary:**

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

**Findings:**7 Number of Comments0 Number of Corrective Actions Corrective Action Response Requested**Contact Information:**

| Contact Name     | Phone                     | Email                         | Comment                     |
|------------------|---------------------------|-------------------------------|-----------------------------|
| Fitzgerald, Edie | 719-845-2108/719-859-1394 | Edie_Fitzgerald@xtoenergy.com | Env. Tech, Raton Basin      |
| Harrison, Lyndon | 505-333-3100              | Lyndon_Harrison@xtoenergy.com |                             |
| Trujillo, Irwin  | 719-846-0272/719-859-2264 | irwin_trujillo@xtoenergy.com  | Sr. Env. Tech., Raton Basin |

**Inspected Facilities:**

| Facility ID | Type | Status | Status Date | Well Class | API Num   | Facility Name     | Insp Status |
|-------------|------|--------|-------------|------------|-----------|-------------------|-------------|
| 217422      | WELL | PR     | 01/01/2015  | GW         | 071-06199 | HILL RANCH 28-12  | PR          |
| 262485      | WELL | PR     | 03/15/2002  | GW         | 071-07551 | HILL RANCH 28-12V | 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 |  |  |  |
|------|------|--------|--|--|--|
|      |      |        |  |  |  |

In Containment: No

Comment:

Multiple Spills and Releases?

**Equipment:**

|                           |                       |  |  | corrective date |
|---------------------------|-----------------------|--|--|-----------------|
| Type: Progressive Cavity  | # 1                   |  |  |                 |
| Comment:                  |                       |  |  |                 |
| Corrective Action:        |                       |  |  | Date:           |
| Type: Vertical Separator  | # 2                   |  |  |                 |
| Comment:                  |                       |  |  |                 |
| Corrective Action:        |                       |  |  | Date:           |
| Type: Deadman # & Marked  | # 8                   |  |  |                 |
| Comment:                  |                       |  |  |                 |
| Corrective Action:        |                       |  |  | Date:           |
| Type: Gas Meter Run       | # 2                   |  |  |                 |
| Comment:                  |                       |  |  |                 |
| Corrective Action:        |                       |  |  | Date:           |
| Type: Ancillary equipment | # 1                   |  |  |                 |
| Comment:                  | Wellhead and plumbing |  |  |                 |
| Corrective Action:        |                       |  |  | Date:           |

**Venting:**

|                    |  |  |       |
|--------------------|--|--|-------|
| Yes/No             |  |  |       |
| Comment:           |  |  |       |
| Corrective Action: |  |  | Date: |

**Flaring:**

|                    |  |  |       |
|--------------------|--|--|-------|
| Type               |  |  |       |
| Comment:           |  |  |       |
| Corrective Action: |  |  | Date: |

**Inspected Facilities**

Facility ID: 217422 Type: WELL API Number: 071-06199 Status: PR Insp. Status: PR

**Producing Well**

Comment: PR

Corrective Action:

Date:

Facility ID: 262485 Type: WELL API Number: 071-07551 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

Type: Produced Water      Lined: NO      Pit ID:      Lat:      Long:

Reference Point: \_\_\_\_\_      Other: \_\_\_\_\_      Length: \_\_\_\_\_      Width: \_\_\_\_\_

**Lining:**

Liner Type:      Liner Condition:

Comment:

Corrective Action

Date: c

**Fencing:**

Fencing Type:      Fencing Condition:

Comment:

Corrective Action

Date:

**Netting:**

Netting Type:      Netting Condition:

Comment:

Corrective Action

Date:

Anchor Trench Present:      Oil Accumulation: NO      2+ feet Freeboard: YES

Comment: 30' x 120', L-shaped, shared

Corrective Action

Date:

| Monitoring: | Monitoring Type | Comment      |
|-------------|-----------------|--------------|
|             | Chain           | Yellow chain |