

**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:

10/26/2017

Submitted Date:

11/02/2017

Document Number:

671000656**FIELD INSPECTION FORM**Loc ID 308976 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:6 Number of Comments0 Number of Corrective Actions☐ Corrective Action Response Requested**Contact Information:**

Contact Name	Phone	Email	Comment
Distribution, Pioneer	972-444-9001	COGCC.Inspections@pxd.com	All Inspections

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
286046	WELL	WO	06/13/2011	SI	071-08900	HOMBRE 12-13	WO

General Comment:

Location

Lease Road:			
Type	Access		
comment:	Two track		
Corrective Action	L	Date:	

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?

Fencing/:			
Type	LOCATION		
Comment:			
Corrective Action:		Date:	

Equipment:			corrective date
Type: Ancillary equipment	# 1		
Comment:	Wellhead		
Corrective Action:		Date:	
Type: Deadman # & Marked	# 4		
Comment:			
Corrective Action:		Date:	

Venting:

Yes/No			
Comment:			
Corrective Action:		Date:	

Flaring:

Type			
Comment:			
Corrective Action:		Date:	

Inspected Facilities									
Facility ID:	286046	Type:	WELL	API Number:	071-08900	Status:	WO	Insp. Status:	WO
Idle Well									
Purpose: <input type="checkbox"/> Shut In <input checked="" type="checkbox"/> Temporarily Abandoned									
Reminder: _____									
Comment: <input type="text" value="Passed MiT on (09/16/14)."/>									
Corrective Action: <input type="text"/> 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

Comment:

Corrective Action:

Date: _____

Pits: ☐ NO SURFACE INDICATION OF PITType: Produced WaterLined: 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: NO2+ feet Freeboard: YESComment: 30' x 70'

Corrective Action

Date: _____

COGCC Comments

Comment	User	Date
<u>Passed MiT on (09/16/14).</u>	duranj	11/02/2017