

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:

01/29/2019

Submitted Date:

01/29/2019

Document Number:

679702802

FIELD INSPECTION FORM

Loc ID _____ Inspector Name: _____ On-Site Inspection
441601 _____ Moran, Rick _____ 2A Doc Num: _____

Operator Information:

OGCC Operator Number: 100264

Name of Operator: XTO ENERGY INC

Address: 110 W 7TH STREET

City: FORTH WORTH State: TX Zip: 76102

Status Summary:

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

Findings:

6 Number of Comments

1 Number of Corrective Actions

-
- Corrective Action Response Requested

**ANY CORRECTIVE ACTION(S) FROM
PREVIOUS INSPECTIONS THAT HAVE NOT
BEEN ADDRESSED ARE STILL APPLICABLE**

Contact Information:

Contact Name	Phone	Email	Comment
Kellerby, Shaun	970-712-1248	shaun.kellerby@state.co.us	
Dooling, Jessica	970-769-6048	Jessica_Dooling@xtoenergy.com	

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
441602	WELL	PR	10/27/2015	GW	103-12269	RNPU 197-15A1	PR
460073	WELL	XX	12/19/2018		103-12344	RNPU 197-15A2H	XX

General Comment:

routine well inspection

Location

Overall Good:

Signs/Marker:

Type	TANK LABELS/PLACARDS		
Comment:			
Corrective Action:		Date:	
Type	BATTERY		
Comment:			
Corrective Action:		Date:	
Type	WELLHEAD		
Comment:			
Corrective Action:		Date:	
Type	CONTAINERS		
Comment:			
Corrective Action:		Date:	

Emergency Contact Number:

Comment: 970-675-4117

Corrective Action:

Date: _____

Good Housekeeping:

Type	STORAGE OF SUPL		
Comment:	On the edge of the location are pallets, empty spools, hose, and extra liner.		
Corrective Action:	Comply with Rule 603.f . Removal of surplus equipment not needed for drilling of the new well.	Date:	04/30/2019

Overall Good:

Spills:

Type	Area	Volume		

In Containment: No

Comment:

Multiple Spills and Releases?

Fencing/:

Type	LOCATION		
Comment:			
Corrective Action:		Date:	

Equipment:

Type: Ancillary equipment	# 1		corrective date
Comment:	One container of MC MX 6-2719 with secondary containment.		
Corrective Action:		Date:	
Type: Plunger Lift	# 1		
Comment:			

Corrective Action:		Date:	
Type: Horizontal Separator	# 1		
Comment:			
Corrective Action:		Date:	
Type: Emission Control Device	# 1		
Comment:			
Corrective Action:		Date:	
Type: Gas Meter Run	# 1		
Comment:			
Corrective Action:		Date:	

Tanks and Berms:

Contents	#	Capacity	Type	Tank ID	SE GPS
CONDENSATE	1	400 BBLs	STEEL AST		39.863100,-108.266200
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	1000 BBLs	STEEL AST		39.863100,-108.266200
Comment:					
Corrective Action:					Date:

Paint

Condition	Adequate	
Other (Content)		
Other (Capacity)	750 bbl	
Other (Type)		

Berms

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

Contents	#	Capacity	Type	Tank ID	SE GPS

PRODUCED WATER	1	200 BBLs	STEEL AST		39.863100,-108.266200	
Comment:						
Corrective Action:					Date:	
Paint						
Condition	Adequate					
Other (Content)						
Other (Capacity)		210 bbl				
Other (Type)						
Berms						
Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance		
Metal	Adequate	Walls Sufficient	Base Sufficient	Adequate		
Comment:						
Corrective Action:					Date:	
Venting:						
Yes/No	NO					
Comment:						
Corrective Action:					Date:	
Flaring:						
Type						
Comment:						
Corrective Action:					Date:	

Inspected Facilities

Facility ID: 441602 Type: WELL API Number: 103-12269 Status: PR Insp. Status: PR

Producing Well

Comment: producing well on plunger lift

Corrective Action:

Date:

Facility ID: 460073 Type: WELL API Number: 103-12344 Status: XX Insp. Status: XX

Idle Well

Purpose: Shut In

Temporarily Abandoned

Reminder: _____

Comment: Well location is flagged. Form 2 to drill submitted November 2018.

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
Compaction		Compaction				

Comment:

Corrective Action:

Date: _____

Pits: NO SURFACE INDICATION OF PIT

Attached Documents

You can go to COGCC Images (<https://cogcc.state.co.us/weblink/>) and search by document number:

Document Num	Description	URL
401922587	INSPECTION SUBMITTED	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4718789
679702803	inspection photos	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4718788