

**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:

03/08/2019

Submitted Date:

03/08/2019

Document Number:

695100312

**FIELD INSPECTION FORM**

Loc ID 333905 Inspector Name: Beardslee, Tom 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:**

6 Number of Comments

2 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
Distribution, Pioneer	972-444-9001	COGCC.Inspections@pxd.com	<a href="#">All Inspections</a>
Distribution, Evergreen		cogcc.evergreen@enrllc.com	<a href="#">All Inspections</a>

**Inspected Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
268861	WELL	PR	03/14/2004	GW	071-07896	SALTY 42-6	PR
274520	WELL	PR	03/24/2005	GW	071-08238	SALTY 42-6 TR	PR

**General Comment:**

**Location**Overall Good: ☒**Signs/Marker:**

Type	OTHER		
Comment:	LOCATION SIGNS ON METER HOUSE		
Corrective Action:		Date:	

Emergency Contact Number:

Comment:		Date:	
Corrective Action:		Date:	

Overall Good: ☒**Spills:**

Type	Area	Volume		
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In Containment: No

Comment:

☐ Multiple Spills and Releases?**Equipment:**

Type: Vertical Separator	# 2		corrective date
Comment:			
Corrective Action:		Date:	
Type: Progressive Cavity	# 2		
Comment:			
Corrective Action:		Date:	
Type: Gas Meter Run	# 2		
Comment:	CALIBRATION REPORT FOR TR WELL IS PAST DUE. ITS BEEN OVER ONE YEAR SINCE LAST CALIBRATION. LAST CAL. ON V WELL 8/22/18		
Corrective Action:	Measure gas per Rule 329.	Date:	04/08/2019
Type: Ancillary equipment	# 2		
Comment:	TELEMETRY EQUIPMENT		
Corrective Action:		Date:	
Type: Prime Mover	# 2		
Comment:			
Corrective Action:		Date:	
Type: Deadman # & Marked	# 8		
Comment:	7 DEADMEN MARKED 1 DEADMAN NOT MARKED		
Corrective Action:	Mark guy line anchors per Rule 1003. a.	Date:	03/29/2019

**Venting:**

Yes/No	NO		
Comment:			
Corrective Action:		Date:	

<b>Flaring:</b>			
Type			
Comment:			
Corrective Action:		Date:	

**Inspected Facilities**Facility ID: 268861 Type: WELL API Number: 071-07896 Status: PR Insp. Status: PR**Producing Well**

Comment:

Corrective Action:

Date:

Facility ID: 274520 Type: WELL API Number: 071-08238 Status: PR Insp. Status: PR**Producing Well**

Comment:

Corrective Action:

Date:

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

Document Num	Description	URL
401966423	INSPECTION SUBMITTED	<a href="http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4757154">http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4757154</a>
695100313	LOCATION PHOTOS	<a href="http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4757145">http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4757145</a>