

**FORM INSP**  
Rev 05/11

**State of Colorado**  
**Oil and Gas Conservation Commission**

1120 Lincoln Street, Suite 801, Denver, Colorado 80205 Phone: (303) 894-2100 Fax: (303) 894-2109



|    |    |    |    |
|----|----|----|----|
| DE | ET | OE | ES |
|----|----|----|----|

Inspection Date:  
02/27/2012

Document Number:  
661400076

Overall Inspection:  
Satisfactory

**FIELD INSPECTION FORM**

|                     |               |               |               |  |
|---------------------|---------------|---------------|---------------|--|
| Location Identifier | Facility ID   | Loc ID        | Tracking Type | Inspector Name: <u>KELLERBY, SHAUN</u> |
|                     | <u>283981</u> | <u>335167</u> |               |  |

**Operator Information:**

OGCC Operator Number: 10232 Name of Operator: LARAMIE ENERGY II, LLC  
Address: 1512 LARIMER ST STE 1000  
City: DENVER State: CO Zip: 80202

**Contact Information:**

| Contact Name   | Phone                             | Email                       | Comment                                       |
|----------------|-----------------------------------|-----------------------------|---|
| Bankert, Wayne | (970) 683-5419/<br>(970) 749-4238 | wbankert@laramie-energy.com | Senior Regulatory & Environmental Coordinator |

**Compliance Summary:**

QtrQtr: NESW Sec: 30 Twp: 6S Range: 93W

| Insp. Date | Doc Num   | Insp. Type | Insp Status | Satisfactory /Unsatisfactory | PA P/F/I | Pas/Fail (P/F) | Violation (Y/N) |
|------------|-----------|------------|-------------|------------------------------|----------|----------------|-----------------|
| 01/23/2009 | 200202784 | CO         | PR          | S                            |          |                | N               |
| 10/14/2008 | 200196950 | PR         | PR          | S                            |          |                | N               |

**Inspector Comment:**

**Related Facilities:**

| Facility ID | Type     | Status | Status Date | Well Class | API Num   | Facility Name              |                                     |
|-------------|----------|--------|-------------|------------|-----------|----------------------------|-------------------------------------|
| 283953      | WELL     | PR     | 06/10/2009  | LO         | 045-12043 | MEAD FEDERAL 30-09D        | <input checked="" type="checkbox"/> |
| 283954      | WELL     | PR     | 04/11/2007  | LO         | 045-12042 | MEAD FEDERAL 30-15B        | <input checked="" type="checkbox"/> |
| 283981      | WELL     | PR     | 04/11/2007  | LO         | 045-12056 | MEAD FEDERAL 30-10B        | <input checked="" type="checkbox"/> |
| 283983      | WELL     | PR     | 06/10/2009  | LO         | 045-12058 | MEAD FEDERAL 30-16D        | <input checked="" type="checkbox"/> |
| 283994      | WELL     | AL     | 01/08/2008  | LO         | 045-12025 | MEAD 30-40                 | <input type="checkbox"/>            |
| 286379      | PIT      | AC     | 08/25/2006  |            | -         | MEAD 30-40                 | <input type="checkbox"/>            |
| 335167      | LOCATION | AC     | 04/14/2009  |            | -         | MEAD FEDERAL-66S93W 30NESW | <input type="checkbox"/>            |

**Equipment:**

Location Inventory

|                              |                        |                     |                         |
|------------------------------|------------------------|---------------------|-------------------------|
| Special Purpose Pits: _____  | Drilling Pits: _____   | Wells: _____        | Production Pits: _____  |
| Condensate Tanks: _____      | Water Tanks: _____     | Separators: _____   | Electric Motors: _____  |
| Gas or Diesel Mortors: _____ | Cavity Pumps: _____    | LACT Unit: _____    | Pump Jacks: _____       |
| Electric Generators: _____   | Gas Pipeline: _____    | Oil Pipeline: _____ | Water Pipeline: _____   |
| Gas Compressors: _____       | VOC Combustor: _____   | Oil Tanks: _____    | Dehydrator Units: _____ |
| Multi-Well Pits: _____       | Pigging Station: _____ | Flare: _____        | Fuel Tanks: _____       |

**Location**

| <b>Signs/Marker:</b> |                             |  |   |            |
|----------------------|-----------------------------|--|---|------------|
| Type                 | Satisfactory/Unsatisfactory | Comment                                      | Corrective Action                       | CA Date    |
| TANK LABELS/PLACARDS | Unsatisfactory              | Labels have weathered on tanks hard to read. | Install sign to comply with rule 210.b. | 03/30/2012 |
| BATTERY              | Satisfactory                |  |   |            |
| WELLHEAD             | Satisfactory                |  |   |            |

Emergency Contact Number: (S/U/V) Satisfactory Corrective Date: \_\_\_\_\_

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

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

| <b>Spills:</b>   |      |        |                   |         |
|--|------|--------|-------------------|---------|
| Type   | Area | Volume | Corrective action | CA Date |
| <input type="checkbox"/> Multiple Spills and Releases? |      |        |                   |         |

| <b>Fencing/:</b> |                             |         |                   |         |
|------------------|-----------------------------|---------|-------------------|---------|
| Type             | Satisfactory/Unsatisfactory | Comment | Corrective Action | CA Date |
| SEPARATOR        | Satisfactory                |         |                   |         |
| WELLHEAD         | Satisfactory                |         |                   |         |

| <b>Equipment:</b>         |   |                             |         |                   |         |
|---------------------------|---|-----------------------------|---------|-------------------|---------|
| Type                      | # | Satisfactory/Unsatisfactory | Comment | Corrective Action | CA Date |
| Vertical Heated Separator | 4 | Satisfactory                |         |                   |         |
| Emission Control Device   | 1 | Satisfactory                |         |                   |         |
| Plunger Lift              | 4 | Satisfactory                |         |                   |         |

**Tanks/Berms:**  New Tank Tank ID: \_\_\_\_\_

| Contents   | # | Capacity | Type      | SE GPS               |
|------------|---|----------|-----------|----------------------|
| CONDENSATE | 4 | 300 BBLS | STEEL AST | 39.494210,107.818680 |

S/U/V: Satisfactory Comment: \_\_\_\_\_

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

**Paint**

|           |                 |
|-----------|-----------------|
| Condition | <u>Adequate</u> |
|-----------|-----------------|

Other (Content) \_\_\_\_\_

Other (Capacity) \_\_\_\_\_

Other (Type) \_\_\_\_\_

**Berms**

| Type  | Capacity        | Permeability (Wall) | Permeability (Base) | Maintenance     |
|-------|-----------------|---------------------|---------------------|-----------------|
| Metal | <u>Adequate</u> |                     |                     | <u>Adequate</u> |

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

Comment \_\_\_\_\_

|                 |         |
|-----------------|---------|
| <b>Venting:</b> |         |
| Yes/No          | Comment |
| NO              |         |

|                 |                             |         |                   |         |
|-----------------|-----------------------------|---------|-------------------|---------|
| <b>Flaring:</b> |                             |         |                   |         |
| Type            | Satisfactory/Unsatisfactory | Comment | Corrective Action | CA Date |
|                 |                             |         |                   |         |

|  |                                      |
|--|--------------------------------------|
| <b>Predrill</b>  |                                      |
| Location ID: <u>335167</u>   |                                      |
| <b>Site Preparation:</b>   |                                      |
| Lease Road Adeq.: _____  | Pads: _____                          |
| Soil Stockpile: _____  |                                      |
| Corrective Action: _____   | Date: _____ CDP Num.: _____          |
| <b>Form 2A COAs:</b>   |                                      |
| <b>Wildlife BMPs:</b>  |                                      |
| <b>Stormwater:</b>   |                                      |
| <b>Comment:</b> _____  |                                      |
| <b>Staking:</b>  |                                      |
| <b>On Site Inspection (305):</b>   |                                      |
| <u>Surface Owner Contact Information:</u>  |                                      |
| Name: _____  | Address: _____                       |
| Phone Number: _____  | Cell Phone: _____                    |
| <u>Operator Rep. Contact Information:</u>  |                                      |
| Landman Name: _____  | Phone Number: _____                  |
| Date Onsite Request Received: _____  | Date of Rule 306 Consultation: _____ |
| Request LGD Attendance: _____  |                                      |
| <u>LGD Contact Information:</u>  |                                      |
| Name: _____  | Phone Number: _____                  |
| Agreed to Attend: _____  |                                      |
| <u>Summary of Landowner Issues:</u>  |                                      |
| _____  |                                      |
| <u>Summary of Operator Response to Landowner Issues:</u>                                 |                                      |
| _____  |                                      |
| <u>Onsite Inspection Memorandum Summarizing Discussions at Inspection as Attachment:</u> |                                      |
| _____  |                                      |

|                            |                              |                   |                         |  |
|----------------------------|------------------------------|-------------------|-------------------------|--|
| <b>Well</b>                |                              |                   |                         |  |
| Facility ID: <u>283953</u> | API Number: <u>045-12043</u> | Status: <u>PR</u> | Insp. Status: <u>PR</u> |  |
| Facility ID: <u>283954</u> | API Number: <u>045-12042</u> | Status: <u>PR</u> | Insp. Status: <u>PR</u> |  |
| Facility ID: <u>283981</u> | API Number: <u>045-12056</u> | Status: <u>PR</u> | Insp. Status: <u>PR</u> |  |
| Facility ID: <u>283983</u> | API Number: <u>045-12058</u> | Status: <u>PR</u> | Insp. Status: <u>PR</u> |  |

|                         |  |
|-------------------------|--|
| <b>Environmental</b>    |  |
| <b>Spills/Releases:</b> |  |

Type of Spill: \_\_\_\_\_ Description: \_\_\_\_\_ Estimated Spill Volume: \_\_\_\_\_  
 Comment: \_\_\_\_\_  
 Corrective Action: \_\_\_\_\_ Date: \_\_\_\_\_  
 Reportable: \_\_\_\_\_ GPS: Lat \_\_\_\_\_ Long \_\_\_\_\_  
 Proximity to Surface Water: \_\_\_\_\_ Depth to Ground Water: \_\_\_\_\_

**Water Well:** \_\_\_\_\_ Lat \_\_\_\_\_ Long \_\_\_\_\_  
 DWR Receipt Num: \_\_\_\_\_ Owner Name: \_\_\_\_\_ GPS : \_\_\_\_\_

**Field Parameters:** \_\_\_\_\_

Sample Location: \_\_\_\_\_

Emission Control Burner (ECB): \_\_\_\_\_  
 Comment: \_\_\_\_\_  
 Pilot: \_\_\_\_\_ Wildlife Protection Devices (fired vessels): \_\_\_\_\_

**Reclamation - Storm Water - Pit**

**Interim Reclamation:**

Date Interim Reclamation Started: \_\_\_\_\_ Date Interim Reclamation Completed: \_\_\_\_\_

Land Use: \_\_\_\_\_  
 Comment: \_\_\_\_\_

1003a. Debris removed? \_\_\_\_\_ CM \_\_\_\_\_  
 CA \_\_\_\_\_ CA Date \_\_\_\_\_  
 Waste Material Onsite? \_\_\_\_\_ CM \_\_\_\_\_  
 CA \_\_\_\_\_ CA Date \_\_\_\_\_  
 Unused or unneeded equipment onsite? \_\_\_\_\_ CM \_\_\_\_\_  
 CA \_\_\_\_\_ CA Date \_\_\_\_\_  
 Pit, cellars, rat holes and other bores closed? \_\_\_\_\_ CM \_\_\_\_\_  
 CA \_\_\_\_\_ CA Date \_\_\_\_\_  
 Guy line anchors removed? \_\_\_\_\_ CM \_\_\_\_\_  
 CA \_\_\_\_\_ CA Date \_\_\_\_\_  
 Guy line anchors marked? \_\_\_\_\_ CM \_\_\_\_\_  
 CA \_\_\_\_\_ CA Date \_\_\_\_\_

1003b. Area no longer in use? \_\_\_\_\_ Production areas stabilized ? \_\_\_\_\_

1003c. Compacted areas have been cross ripped? \_\_\_\_\_

1003d. Drilling pit closed? \_\_\_\_\_ Subsidence over on drill pit? \_\_\_\_\_

Cuttings management: \_\_\_\_\_

1003e. Areas no longer needed for drilling or subsequent operations for have been re-vegetated to 80% of pre-existing? \_\_\_\_\_

Production areas have been stabilized? \_\_\_\_\_ Segregated soils have been replaced? \_\_\_\_\_

**RESTORATION AND REVEGETATION**

Cropland

Inspector Name: KELLERBY, SHAUN

Top soil replaced \_\_\_\_\_ Recontoured \_\_\_\_\_ Perennial forage re-established \_\_\_\_\_

Non-Cropland

Top soil replaced \_\_\_\_\_ Recontoured \_\_\_\_\_ 80% Revegetation \_\_\_\_\_

1003 f. Weeds Noxious weeds? \_\_\_\_\_

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

Overall Interim Reclamation \_\_\_\_\_

**Final Reclamation/ Abandoned Location:**

Date Final Reclamation Started: \_\_\_\_\_ Date Final Reclamation Completed: \_\_\_\_\_

Final Land Use: \_\_\_\_\_

Reminder: \_\_\_\_\_

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

Well plugged \_\_\_\_\_ Pit mouse/rat holes, cellars backfilled \_\_\_\_\_

Debris removed \_\_\_\_\_ No disturbance /Location never built \_\_\_\_\_

Access Roads Regraded \_\_\_\_\_ Contoured \_\_\_\_\_ Culverts removed \_\_\_\_\_

Gravel removed \_\_\_\_\_

Location and associated production facilities reclaimed \_\_\_\_\_ Locations, facilities, roads, recontoured \_\_\_\_\_

Compaction alleviation \_\_\_\_\_ Dust and erosion control \_\_\_\_\_

Non cropland: Revegetated 80% \_\_\_\_\_ Cropland: perennial forage \_\_\_\_\_

Weeds present \_\_\_\_\_ Subsidence \_\_\_\_\_

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

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

Overall Final Reclamation \_\_\_\_\_

**Storm Water:**

| Loc Erosion BMPs | BMP Maintenance | Lease Road Erosion BMPs | Lease BMP Maintenance | Chemical BMPs | Chemical BMP Maintenance | Comment |
|------------------|-----------------|-------------------------|-----------------------|---------------|--------------------------|---------|
| Berms            | Pass            |                         |                       | MHSP          | Pass                     |         |

S/U/V: Satisfactory \_\_\_\_\_ Corrective Date: \_\_\_\_\_

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

CA: \_\_\_\_\_

| Permit: | Facility ID | Permit Num | Expiration Date |
|---------|-------------|------------|-----------------|
|         | 286379      | 1433498    |                 |