

FORM INSP
Rev 05/11

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

1120 Lincoln Street, Suite 801, Denver, Colorado 80203 Phone: (303) 894-2100 Fax: (303) 894-2109



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

Inspection Date:
09/13/2012

Document Number:
663300566

Overall Inspection:
Satisfactory

FIELD INSPECTION FORM

| | | | | |
|---------------------|---------------|---------------|---------------|--------------------|
| Location Identifier | Facility ID | Loc ID | Tracking Type | Inspector Name: |
| | <u>421427</u> | <u>421437</u> | | <u>SCHURE, KYM</u> |

Operator Information:

| | | | |
|-----------------------|---------------------------------|-------------------|--|
| OGCC Operator Number: | <u>200149</u> | Name of Operator: | <u>ATLAS RESOURCES LLC DBA ATLAS ROCKIES LLC</u> |
| Address: | <u>3500 MASSILLON ROAD #100</u> | | |
| City: | <u>UNIONTOWN</u> | State: | <u>OH</u> |
| | | Zip: | <u>44685</u> |

Contact Information:

| Contact Name | Phone | Email | Comment |
|--------------|-------|----------------------------------|---------|
| | | <u>mcutright@atlasenergy.com</u> | |

Compliance Summary:

| | | | | | | | |
|---------|-------------|------|-----------|------|-----------|--------|------------|
| QtrQtr: | <u>SWSE</u> | Sec: | <u>31</u> | Twp: | <u>9N</u> | Range: | <u>43W</u> |
|---------|-------------|------|-----------|------|-----------|--------|------------|

Inspector Comment:

Related Facilities:

| Facility ID | Type | Status | Status Date | Well Class | API Num | Facility Name | |
|---------------|-------------|-----------|-------------------|------------|------------------|---------------------------|-------------------------------------|
| <u>421427</u> | <u>WELL</u> | <u>PR</u> | <u>04/18/2011</u> | | <u>095-06307</u> | <u>Brinkema 943-31-34</u> | <input checked="" type="checkbox"/> |

Equipment:

Location Inventory

| | | | | | | | |
|------------------------|----------|------------------|----------|---------------|----------|-------------------|----------|
| Special Purpose Pits: | _____ | Drilling Pits: | <u>1</u> | Wells: | <u>1</u> | Production Pits: | _____ |
| Condensate Tanks: | _____ | Water Tanks: | _____ | Separators: | <u>1</u> | Electric Motors: | _____ |
| Gas or Diesel Mortors: | <u>1</u> | Cavity Pumps: | _____ | LACT Unit: | _____ | Pump Jacks: | <u>1</u> |
| Electric Generators: | _____ | Gas Pipeline: | <u>1</u> | Oil Pipeline: | _____ | Water Pipeline: | <u>1</u> |
| Gas Compressors: | _____ | VOC Combustor: | _____ | Oil Tanks: | _____ | Dehydrator Units: | _____ |
| Multi-Well Pits: | _____ | Pigging Station: | _____ | Flare: | _____ | Fuel Tanks: | _____ |

Location

| | | | | |
|---------------------------|----------------|--------------|------------------|-------|
| Emergency Contact Number: | <u>(S/U/V)</u> | Satisfactory | Corrective Date: | _____ |
| Comment: | _____ | | | |
| Corrective Action: | _____ | | | |

Spills:

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

Equipment:

| Type | # | Satisfactory/Unsatisfactory | Comment | Corrective Action | CA Date |
|---------------|----------|-----------------------------|---------|-------------------|---------|
| Pump Jack | <u>1</u> | <u>Satisfactory</u> | | | |
| Gas Meter Run | <u>1</u> | <u>Satisfactory</u> | | | |

| | |
|-----------------|---------|
| Venting: | |
| Yes/No | Comment |
| | |

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

Predrill

Location ID: 421437

Site Preparation:

Lease Road Adeq.: _____ Pads: _____ Soil Stockpile: _____
 Corrective Action: _____ Date: _____ CDP Num.: _____

Form 2A COAs:

Comment: _____

CA: _____ **Date:** _____

Wildlife BMPs:

Comment: _____

CA: _____ **Date:** _____

Stormwater:

| | | | |
|--------------|---------|------------|---------|
| Erosion BMPs | Present | Other BMPs | Present |
| | | | |

Corrective Action: _____ Date: _____

Comments: Erosion BMPs: _____
 Other BMPs: _____

Comment: _____

Staking:

On Site Inspection (305):

Surface Owner Contact Information:

Name: _____ Address: _____
 Phone Number: _____ Cell Phone: _____

Operator Rep. Contact Information:

Landman Name: _____ Phone Number: _____
 Date Onsite Request Received: _____ Date of Rule 306 Consultation: _____

Request LGD Attendance: _____

LGD Contact Information:

Name: _____ Phone Number: _____ Agreed to Attend: _____

Summary of Landowner Issues:

Summary of Operator Response to Landowner Issues:

Onsite Inspection Memorandum Summarizing Discussions at Inspection as Attachment:

Facility

Facility ID: 421427 Type: WELL API Number: 095-06307 Status: PR Insp. Status: PR

Producing Well

Comment: N/G well, gas meter run, pump jack. No problems found

Environmental

Spills/Releases:
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:
DWR Receipt Num: _____ Owner Name: _____ GPS : _____
Lat _____ Long _____

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: DRY LAND
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

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: DRY LAND _____

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 _____ Multi-Well Location

Storm Water:

| Loc Erosion BMPs | BMP Maintenance | Lease Road Erosion BMPs | Lease BMP Maintenance | Chemical BMPs | Chemical BMP Maintenance | Comment |
|------------------|-----------------|-------------------------|-----------------------|---------------|--------------------------|---------|
| | | | | | | |

S/U/V: _____ Corrective Date: _____

Comment: _____

CA: _____