

**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
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Inspection Date:

01/03/2013

Document Number:

668500262

Overall Inspection:

Satisfactory**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Tracking Type	Inspector Name: Baroumand, Soraya
	292066	334451		

Operator Information:OGCC Operator Number: 10433 Name of Operator: PICEANCE ENERGY LLCAddress: 1512 LARIMER STREET #1000City: DENVER State: CO Zip: 80202**Contact Information:**

Contact Name	Phone	Email	Comment
Natvig, Randy	303-339-4337	Rnatvig@laramie-energy.com	Drilling and Completions Manager
Bankert, Wayne	970-812-5310	wbankert@laramie-energy.com	Senior Regulatory & Environmental Coordinator

Compliance Summary:QtrQtr: NESE Sec: 27 Twp: 9S Range: 93W

Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Unsatisfactory	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
11/12/2010	200287078	PR	PR	S			N
08/22/2007	200121281	CC	ND	S			N

Inspector Comment:**Related Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	
290617	WELL	PR	05/16/2007	GW	077-09288	NORTH VEGA 27-431	X
291424	WELL	PR	07/17/2007	GW	077-09334	DELTA 27-321	X
291428	WELL	PR	07/17/2007	GW	077-09335	DELTA 27-314	X
291429	WELL	PR	07/17/2007	GW	077-09336	DELTA 27-421	X
292063	WELL	PR	08/28/2007	GW	077-09383	DELTA 27-334	X
292064	WELL	PR	08/28/2007	GW	077-09382	DELTA 27-324	X
292065	WELL	PR	08/28/2007	GW	077-09381	DELTA 27-434	X
292066	WELL	PR	08/28/2007	GW	077-09380	DELTA 27-424	X

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: _____

LocationEmergency Contact Number: (S/U/V) UnsatisfactoryCorrective Date: 04/30/2013Comment: signs need updated emergency contact numbersCorrective Action: Provide emergency contact information and phone number(s) on sign at which the operator can be reached at all times per rule 210.b.2.**Spills:**

Type	Area	Volume	Corrective action	CA Date
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☐ Multiple Spills and Releases?**Equipment:**

Type	#	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
Horizontal Heated Separator	8	Satisfactory	2-quad units		
Gas Meter Run	1	Satisfactory			
Emission Control Device	1	Satisfactory			

Facilities:☐ New Tank

Tank ID: _____

Contents	#	Capacity	Type	SE GPS
CONDENSATE	4	400 BBLS	STEEL AST	,

S/U/V:

Comment:

Corrective Action:

Corrective Date:

Paint

Condition	Inadequate
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Other (Content) _____

Other (Capacity) _____

Other (Type) _____

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Metal	Adequate	Walls Sufficient	Base Sufficient	Adequate

Corrective Action _____ Corrective Date _____

Comment _____

Venting:

Yes/No _____ Comment _____

Flaring:

Type _____ Satisfactory/Unsatisfactory _____ Comment _____ Corrective Action _____ CA Date _____

Predrill

Location ID: 334451

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: 290617 Type: WELL API Number: 077-09288 Status: PR Insp. Status: PR

Producing Well**Comment:**

Facility ID: 291424 Type: WELL API Number: 077-09334 Status: PR Insp. Status: PR

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Producing Well

Comment: producing

Facility ID: 291428 Type: WELL API Number: 077-09335 Status: PR Insp. Status: PR

Producing Well

Comment:

Facility ID: 291429 Type: WELL API Number: 077-09336 Status: PR Insp. Status: PR

Producing Well

Comment:

Facility ID: 292063 Type: WELL API Number: 077-09383 Status: PR Insp. Status: PR

Producing Well

Comment:

Facility ID: 292064 Type: WELL API Number: 077-09382 Status: PR Insp. Status: PR

Producing Well

Comment:

Facility ID: 292065 Type: WELL API Number: 077-09381 Status: PR Insp. Status: PR

Producing Well

Comment:

Facility ID: 292066 Type: WELL API Number: 077-09380 Status: PR Insp. Status: PR

Producing Well

Comment:

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: _____

Comment: _____

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

1003b. Area no longer in use? In Production areas stabilized ? Pass1003c. Compacted areas have been cross ripped? In1003d. Drilling pit closed? Pass Subsidence over on drill pit? Pass

Cuttings management: _____

1003e. Areas no longer needed for drilling or subsequent operations for have been re-vegetated to 80% of pre-existing? InProduction areas have been stabilized? Pass Segregated soils have been replaced? In**RESTORATION AND REVEGETATION**CroplandTop soil replaced _____ Recontoured _____ Perennial forage re-established InNon-CroplandTop soil replaced In Recontoured In 80% Revegetation In1003 f. Weeds Noxious weeds? P

Comment: _____

Overall Interim Reclamation In Process**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 _____

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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
Gradient Terraces	Pass					
Berms	Pass					
Ditches	Pass					

S/U/V: Satisfactory _____ Corrective Date: _____

Comment: _____

CA: _____