

**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



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Inspection Date:

03/19/2013

Document Number:

670500609

Overall Inspection:

Satisfactory**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	423793	423795	MONTOYA, JOHN	<input type="checkbox"/>	

Operator Information:OGCC Operator Number: 8960 Name of Operator: BONANZA CREEK ENERGY OPERATING COMPANY LLCAddress: 410 17TH STREET SUITE #1400City: DENVERState: COZip: 80202**Contact Information:**

Contact Name	Phone	Email	Comment
Jones, Alan	661-444-0999	jaj@bonanzacrk.com	

Compliance Summary:QtrQtr: NENE Sec: 17 Twp: 5N Range: 62W**Inspector Comment:****Related Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	
423780	WELL	PR	09/29/2011	GW	123-33716	Antelope 41-17	<input type="checkbox"/>
423781	WELL	PR	10/10/2011	GW	123-33717	Antelope 32-17	<input type="checkbox"/>
423782	WELL	XX	06/24/2011	LO	123-33718	Antelope Q-17	<input type="checkbox"/>
423790	WELL	PR	09/29/2011	GW	123-33726	Antelope 42-17	<input type="checkbox"/>
423793	WELL	PR	11/30/2011		123-33728	Antelope 31-17	<input checked="" type="checkbox"/>

Equipment:Location Inventory

Special Purpose Pits: _____	Drilling Pits: _____	Wells: <u>5</u>	Production Pits: _____
Condensate Tanks: <u>4</u>	Water Tanks: _____	Separators: <u>2</u>	Electric Motors: _____
Gas or Diesel Mortors: _____	Cavity Pumps: _____	LACT Unit: _____	Pump Jacks: _____
Electric Generators: _____	Gas Pipeline: <u>1</u>	Oil Pipeline: _____	Water Pipeline: _____
Gas Compressors: _____	VOC Combustor: <u>1</u>	Oil Tanks: _____	Dehydrator Units: _____
Multi-Well Pits: _____	Pigging Station: _____	Flare: _____	Fuel Tanks: _____

Location

Signs/Marker:				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
WELLHEAD	Satisfactory			

Emergency Contact Number: (S/U/V) _____

Corrective Date: _____

Comment: _____

Corrective Action: _____

Inspector Name: MONTOYA, JOHN

Spills:					
Type	Area	Volume	Corrective action	CA Date	
<input type="checkbox"/> Multiple Spills and Releases?					
Equipment:					
Type	#	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
Plunger Lift	1	Satisfactory			
Venting:					
Yes/No		Comment			
Flaring:					
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date	

Predrill

Location ID: 423795

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: 423793 Type: WELL API Number: 123-33728 Status: PR Insp. Status: PR

Environmental**Spills/Releases:**

Type of Spill: _____ Description: _____ Estimated Spill Volume: _____

Inspector Name: MONTOYA, JOHN

Comment: <input style="width:700px" type="text"/>			
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:			
<input style="width:300px" type="text"/>			
Sample Location: <input style="width:400px" type="text"/>			
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: RANGELAND			
Comment: <input style="width:700px" type="text"/>			
1003a.	Debris removed? <u>Pass</u>	CM _____	
	CA _____		CA Date _____
	Waste Material Onsite? <u>Pass</u>	CM _____	
	CA _____		CA Date _____
	Unused or unneeded equipment onsite? <u>Pass</u>	CM _____	
	CA _____		CA Date _____
	Pit, cellars, rat holes and other bores closed? <u>Pass</u>	CM _____	
	CA _____		CA Date _____
	Guy line anchors removed? <u>Pass</u>	CM _____	
	CA _____		CA Date _____
	Guy line anchors marked? <u>Pass</u>	CM _____	
	CA _____		CA Date _____
1003b.	Area no longer in use? <u>Pass</u>	Production areas stabilized ? <u>Pass</u>	
1003c. Compacted areas have been cross ripped? _____			
1003d. Drilling pit closed? <u>Pass</u> Subsidence over on drill pit? <u>Pass</u>			
Cuttings management: _____			
1003e. Areas no longer needed for drilling or subsequent operations for have been re-vegetated to 80% of pre-existing? <u>Pass</u>			
Production areas have been stabilized? <u>Pass</u>		Segregated soils have been replaced? <u>Pass</u>	
RESTORATION AND REVEGETATION			
<u>Cropland</u>			
Top soil replaced _____		Recontoured _____	Perennial forage re-established _____

<u>Non-Cropland</u>		
Top soil replaced	<u>Pass</u>	Recontoured <u>Pass</u>
		80% Revegetation <u>Pass</u>
1003 f. Weeds Noxious weeds?	<u>P</u>	
Comment:	<div></div>	
Overall Interim Reclamation	<u>Pass</u>	

Date Final Reclamation Started:	_____	Date Final Reclamation Completed:	_____
Final Land Use:	RANGELAND		
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	<input type="checkbox"/>

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: _____