

**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:

03/25/2013

Document Number:

670200281

Overall Inspection:

Unsatisfactory**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	<u>283835</u>	<u>335055</u>	<u>BURGER, CRAIG</u>	<input type="checkbox"/>	

Operator Information:OGCC Operator Number: 10079 Name of Operator: ANTERO RESOURCES PICEANCE CORPORATIONAddress: 1625 17TH ST STE 300City: DENVERState: COZip: 80202**Contact Information:**

Contact Name	Phone	Email	Comment
Kellerby, Shaun		Shaun.Kellerby@state.co.us	NW Field Supervisor
Bleil, Robert	720-425-0303	rbleil@ursaresources.com	Regulatory and Environmental Manager

Compliance Summary:QtrQtr: SENW Sec: 7 Twp: 7S Range: 91W

Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Unsatisfactory	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
08/13/2008	200193721	PR	PR	S			N

Inspector Comment:

Conductor pipes set for API's 045-11982, 045-17083, 045-17085, and 045-17086. The conductor pipe at 045-11982 is not capped. Others are capped. Informed pumper and he stated he would provide a cap for the conductor pipe. Form 4 regarding plans for the conductor pipes is not in the COGCC database.

Related Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	
268723	WELL	PR	12/05/2003	GW	045-09287	CSF 22C-07-07-91	X
279971	WELL	PR	10/13/2011	GW	045-11120	CSF 11B-07-07-91	X
279974	WELL	PR	03/11/2009	GW	045-11122	CSF 21B-07-07-91	X
283835	WELL	XX	09/06/2011	LO	045-11982	CSF 12A-07-07-91	X
283836	WELL	PR	03/01/2012	GW	045-11983	CSF 31B-07-07-91	X
283837	WELL	PR	02/21/2012	GW	045-11984	CSF 32B-07-07-91	X
298149	WELL	XX	09/06/2011	LO	045-17085	CSF 11A-07-07-91	X
298150	WELL	XX	12/11/2012	LO	045-17083	CSF 21A-07-07-91	X
298151	WELL	PR	03/01/2012	GW	045-17084	CSF 21C-07-07-91	X
298152	WELL	XX	09/06/2011	LO	045-17086	CSF 31A-07-07-91	X

Equipment:**Location Inventory**

Inspector Name: BURGER, CRAIG

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

Signs/Marker:

Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
TANK LABELS/PLACARDS	Satisfactory			
BATTERY	Satisfactory			
WELLHEAD	Satisfactory			

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

Comment: _____

Corrective Action: _____

Spills:

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

Fencing/:

Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
LOCATION	Satisfactory	Barbed wire.		
WELLHEAD	Satisfactory	Cattle panel.		

Equipment:

Type	#	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
Deadman # & Marked	4	Satisfactory			
Bird Protectors	6	Satisfactory			
Plunger Lift	5	Satisfactory			
Horizontal Heated Separator	2	Unsatisfactory		Provide containment for separators.	05/15/2013
Vertical Heated Separator	5	Unsatisfactory		Provide containment for separators.	05/15/2013
Gas Meter Run	1	Satisfactory			
Gathering Line	1	Satisfactory			
Pig Station	1	Satisfactory			

Facilities:		<input type="checkbox"/> New Tank		Tank ID: _____	
Contents	#	Capacity	Type	SE GPS	
CONDENSATE	1	400 BBLS	HEATED STEEL AST	39.533360,-107.567050	
S/U/V:	Satisfactory		Comment:		
Corrective Action:				Corrective Date:	
<u>Paint</u>					
Condition	Adequate				
Other (Content) _____					
Other (Capacity) _____					
Other (Type) _____					
<u>Berms</u>					
Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance	
Metal	Adequate	Walls Sufficient	Base Sufficient	Adequate	
Corrective Action				Corrective Date	
Comment					
Facilities:		<input type="checkbox"/> New Tank		Tank ID: _____	
Contents	#	Capacity	Type	SE GPS	
CONDENSATE	2	300 BBLS	HEATED STEEL AST	,	
S/U/V:	Satisfactory		Comment: Same berm as 400 bbl tank.		
Corrective Action:				Corrective Date:	
<u>Paint</u>					
Condition	Adequate				
Other (Content) _____					
Other (Capacity) _____					
Other (Type) _____					
<u>Berms</u>					
Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance	
Corrective Action				Corrective Date	
Comment					
Venting:					
Yes/No		Comment			
Flaring:					
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date	

Predrill

Location ID: 335055

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: 268723 Type: WELL API Number: 045-09287 Status: PR Insp. Status: PR

Producing Well

Comment: plunger lift

Facility ID: 279971 Type: WELL API Number: 045-11120 Status: PR Insp. Status: PR

Producing WellComment: Facility ID: 279974 Type: WELL API Number: 045-11122 Status: PR Insp. Status: PR**Producing Well**Comment: Facility ID: 283835 Type: WELL API Number: 045-11982 Status: XX Insp. Status: UNFacility ID: 283836 Type: WELL API Number: 045-11983 Status: PR Insp. Status: PR**Producing Well**Comment: Facility ID: 283837 Type: WELL API Number: 045-11984 Status: PR Insp. Status: PR**Producing Well**Comment: Facility ID: 298149 Type: WELL API Number: 045-17085 Status: XX Insp. Status: UNFacility ID: 298150 Type: WELL API Number: 045-17083 Status: XX Insp. Status: UNFacility ID: 298151 Type: WELL API Number: 045-17084 Status: PR Insp. Status: SI**Idle Well**Purpose: ☒ Shut In ☐ Temporarily Abandoned Reminder: S/V: Satisfactory CA Date: CA: Comment: Facility ID: 298152 Type: WELL API Number: 045-17086 Status: XX Insp. Status: UN**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): N

Comment: _____

Pilot: _____ Wildlife Protection Devices (fired vessels): YES**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? _____ 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? _____ 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 REVEGETATIONCropland

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 _____

Inspector Name: BURGER, CRAIG

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
Berms	Pass	Check Dams	Pass			
		Sediment Traps	Pass			
Compaction	Pass	Ditches	Pass			
Waddles	Pass	Gravel	Pass	MHSP	Pass	

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

Comment: Some erosion rills are forming on cut slopes of access road.

CA: _____