

**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:

04/30/2013

Document Number:

670200395

Overall Inspection:

Satisfactory**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	419543	417777	BURGER, CRAIG	<input type="checkbox"/>	

**Operator Information:**OGCC Operator Number: 10079 Name of Operator: ANTERO RESOURCES PICEANCE LLCAddress: 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: SWSW Sec: 7 Twp: 6S Range: 91W**Inspector Comment:**

Four capped conductor pipes on location. A form 4 is required per the COGCC Conductor Pipe Policy. See inspection document #670200396.

**Related Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	
417823	WELL	PR	01/17/2012	GW	045-19639	Frei A21	<input checked="" type="checkbox"/>
417824	WELL	PR	10/04/2012	GW	045-19640	Frei A11	<input checked="" type="checkbox"/>
417825	WELL	PR	10/04/2012	GW	045-19641	Frei A9	<input checked="" type="checkbox"/>
417829	WELL	PR	10/28/2011	GW	045-19642	Frei A16	<input checked="" type="checkbox"/>
419521	WELL	XX	09/29/2010	LO	045-19945	Frei A20	<input type="checkbox"/>
419524	WELL	XX	09/29/2010	LO	045-19946	Frei A17	<input type="checkbox"/>
419525	WELL	XX	09/29/2010	LO	045-19947	Frei A14	<input type="checkbox"/>
419526	WELL	XX	09/29/2010	LO	045-19948	Frei A13	<input type="checkbox"/>
419527	WELL	XX	09/29/2010	LO	045-19949	Frei A12	<input type="checkbox"/>
419528	WELL	XX	09/29/2010	LO	045-19950	Frei A15	<input type="checkbox"/>
419529	WELL	XX	09/29/2010	LO	045-19951	Frei A18	<input type="checkbox"/>
419530	WELL	AL	04/09/2012		045-19952	Frei A4	<input type="checkbox"/>
419532	WELL	XX	09/29/2010	LO	045-19953	Frei A5	<input type="checkbox"/>
419534	WELL	XX	09/29/2010	LO	045-19954	Frei A2	<input type="checkbox"/>
419535	WELL	XX	09/29/2010	LO	045-19955	Frei A19	<input type="checkbox"/>
419536	WELL	XX	09/29/2010	LO	045-19956	Frei A22	<input type="checkbox"/>
419537	WELL	XX	09/29/2010	LO	045-19957	Frei A8	<input type="checkbox"/>
419539	WELL	XX	09/29/2010	LO	045-19958	Frei A1	<input type="checkbox"/>
419540	WELL	AL	04/09/2012		045-19959	Frei A3	<input type="checkbox"/>
419541	WELL	XX	09/29/2010	LO	045-19960	Frei A6	<input type="checkbox"/>

419542	WELL	XX	09/29/2010	LO	045-19961	Frei A10	
419543	WELL	XX	09/29/2010	LO	045-19962	Frei A7	

**Equipment:**Location Inventory

Special Purpose Pits: _____	Drilling Pits: _____	Wells: <u>22</u>	Production Pits: _____
Condensate Tanks: <u>3</u>	Water Tanks: <u>4</u>	Separators: <u>6</u>	Electric Motors: _____
Gas or Diesel Motors: _____	Cavity Pumps: _____	LACT Unit: _____	Pump Jacks: _____
Electric Generators: _____	Gas Pipeline: <u>1</u>	Oil Pipeline: <u>1</u>	Water Pipeline: <u>1</u>
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
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
WELLHEAD	Satisfactory	cattle panel		

**Equipment:**

Type	#	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
Horizontal Heated Separator	5	Unsatisfactory	No secondary containment at separators.	Provide secondary containment at separators.	05/31/2013
Gathering Line	1	Satisfactory			
Gas Meter Run	1	Satisfactory			
Ancillary equipment	1	Satisfactory	descaler unit		
Deadman # & Marked	7	Satisfactory			
Pig Station	1	Satisfactory			
Plunger Lift	4	Satisfactory			
Bird Protectors	3	Satisfactory			
Emission Control Device	1	Satisfactory			

<b>Facilities:</b>		<input type="checkbox"/> New Tank		Tank ID: _____	
Contents	#	Capacity	Type	SE GPS	
PRODUCED WATER	3	300 BBLS	STEEL AST	,	
S/U/V:	Satisfactory		Comment:	same berm as condensate tanks	
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					
<b>Facilities:</b>		<input type="checkbox"/> New Tank		Tank ID: _____	
Contents	#	Capacity	Type	SE GPS	
CONDENSATE	3	300 BBLS	STEEL AST	39.535630, -107.603040	
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					
<b>Venting:</b>					
Yes/No	Comment				
NO					
<b>Flaring:</b>					
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date	
Ignitor/Combustor	Satisfactory				
<b><u>Predrill</u></b>					
Location ID: 417777					
<b>Site Preparation:</b>					
Lease Road Adeq.: _____		Pads: _____		Soil Stockpile: _____	
Corrective Action: _____		Date: _____		CDP Num.: _____	

**Form 2A COAs:**

Group	User	Comment	Date
Agency	edelenr	Operator must implement best management practices to contain any unintentional release of fluids.	06/11/2010
Agency	kubeczkod	No portion of any pit that will be used to hold liquids shall be constructed on fill material, unless the pit and fill slope are designed and certified by a professional engineer, subject to review and approval by the director prior to construction of the pit. The construction and lining of the pit shall be supervised by a professional engineer or their agent. The entire base of the pit must be in cut.	06/11/2010
Agency	edelenr	Operator must ensure 110 percent secondary containment for any volume of fluids contained at well site during drilling and completion operations. If fluids are conveyed via pipeline, operator must implement best management practices to contain any unintentional release of fluids.	06/11/2010
Agency	edelenr	Location is in a sensitive area because of proximity to surface water; therefore, operator must ensure 110 percent secondary containment for any volume of fluids contained at well site during drilling and completion operations.	06/11/2010
Agency	edelenr	Reserve pit must be lined or closed loop system must be implemented during drilling.	06/11/2010
Agency	edelenr	The moisture content of any drill cuttings in a cuttings pit, trench, or pile shall be as low as practicable to prevent accumulation of liquids greater than de minimis amounts. At the time of closure, the drill cuttings must also meet the applicable standards of table 910-1.	06/11/2010

**Comment:** No drilling at time of inspection.**CA:**  **Date:** **Wildlife BMPs:****Comment:** **CA:**  **Date:** **Stormwater:**

Erosion BMPs	Present	Other BMPs	Present
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Corrective Action:  Date: 
 Comments: Erosion BMPs:   
 Other BMPs: 
**Comment:** **Staking:****On Site Inspection (305):****Surface Owner Contact Information:**
 Name:  Address:   
 Phone Number:  Cell Phone:

Inspector Name: BURGER, CRAIG

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: 417823 Type: WELL API Number: 045-19639 Status: PR Insp. Status: PR

**Producing Well**

Comment: plunger lift

Facility ID: 417824 Type: WELL API Number: 045-19640 Status: PR Insp. Status: PR

**Producing Well**

Comment: plunger lift

Facility ID: 417825 Type: WELL API Number: 045-19641 Status: PR Insp. Status: PR

**Producing Well**

Comment: plunger lift

Facility ID: 417829 Type: WELL API Number: 045-19642 Status: PR Insp. Status: PR

**Producing Well**

Comment: plunger lift

**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): Y

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

Pilot: ONWildlife Protection Devices (fired vessels): YES**Reclamation - Storm Water - Pit****Interim Reclamation:**

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

Land Use: OTHER

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? Fail CM Pipe connected to bradens open.CA Cap pipe. CA Date 05/31/2013

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? 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? \_\_\_\_\_

Production areas have been stabilized? Pass 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? \_\_\_\_\_ P \_\_\_\_\_

Comment: Large pad area adjacent to gravel operation.A form 4 is required per the COGCC Conductor Pipe Policy that includes future plans for the wells and well construction.

Overall Interim Reclamation

**Final Reclamation/ Abandoned Location:**

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

Final Land Use: OTHER, RANGELAND

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

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

Inspector Name: BURGER, CRAIG

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
Blankets	Fail	Ditches	Pass	MHSP	Pass	
Berms	Pass	Check Dams	Fail			
Gravel	Pass					

S/U/V: **Unsatisfactory** Corrective Date: **05/31/2013**

Comment: Blankets need maintenance. Some gravel bag check dams are silted over.

CA: Maintain BMP's.