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|--|---|--|----|----|----|----|
| FORM INSP Rev 05/11 | State of Colorado Oil and Gas Conservation Commission <small>1120 Lincoln Street, Suite 801, Denver, Colorado 80203 Phone: (303) 894-2100 Fax: (303) 894-2109</small> |  | DE | ET | OE | ES |
|--|---|--|----|----|----|----|

FIELD INSPECTION FORM

| | | | | | |
|---------------------|-------------|--------|-----------------|--------------------|--------------------------|
| Location Identifier | Facility ID | Loc ID | Inspector Name: | On-Site Inspection | <input type="checkbox"/> |
| | 275527 | 335441 | BURGER, CRAIG | 2A Doc Num: | |

Inspection Date:
05/06/2013

Document Number:
670200414

Overall Inspection:
Satisfactory

Operator Information:

OGCC Operator Number: 10071 Name of Operator: BARRETT CORPORATION* BILL

Address: 1099 18TH ST STE 2300

City: DENVER State: CO Zip: 80202

Contact Information:

| Contact Name | Phone | Email | Comment |
|-----------------|-------|------------------------------|---------------------|
| Merry, Jesse | | jmerry@billbarrettcorp.com | Area Superintendent |
| Kellerby, Shaun | | Shaun.Kellerby@state.co.us | NW Field Supervisor |
| Axelsson, Aaron | | aaxelson@billbarrettcorp.com | Production Foreman |

Compliance Summary:

QtrQtr: NWSE Sec: 23 Twp: 6S Range: 92W

| Insp. Date | Doc Num | Insp. Type | Insp Status | Satisfactory /Unsatisfactory | PA P/F/I | Pas/Fail (P/F) | Violation (Y/N) |
|------------|-----------|------------|-------------|------------------------------|----------|----------------|-----------------|
| 06/01/2011 | 200311699 | CO | PR | U | | | Y |
| 05/02/2010 | 200258625 | SR | PR | S | | | N |
| 05/27/2008 | 200190739 | CO | PR | S | I | | N |
| 12/24/2007 | 200124625 | CO | PR | S | I | | N |
| 10/24/2007 | 200124142 | CO | PR | S | I | | N |
| 09/24/2007 | 200123465 | CO | PR | S | I | | N |
| 08/13/2007 | 200117252 | CO | PR | S | I | | N |
| 04/18/2007 | 200109857 | PR | PR | S | I | P | N |
| 04/10/2007 | 200114089 | PR | PR | S | I | P | N |
| 04/10/2007 | 200114088 | CO | PR | S | I | P | N |
| 08/30/2006 | 200102191 | PR | PR | S | | P | N |
| 05/31/2006 | 200096974 | CO | PR | S | I | P | N |
| 03/08/2006 | 200087460 | PR | PR | S | I | P | N |
| 10/25/2005 | 200085050 | CO | WO | U | | F | Y |
| 10/18/2005 | 200084488 | PR | WO | S | | P | N |

Inspector Comment:

Related Facilities:

| Facility ID | Type | Status | Status Date | Well Class | API Num | Facility Name | |
|-------------|------|--------|-------------|------------|-----------|-------------------|-------------------------------------|
| 275527 | WELL | PR | 10/28/2005 | GW | 045-10340 | WILSON 43C-23-692 | <input checked="" type="checkbox"/> |
| 276317 | WELL | PR | 07/16/2009 | GW | 045-10440 | WILSON 33D-23-692 | <input checked="" type="checkbox"/> |

| | | | | | | | |
|--------|------|----|------------|----|-----------|-------------------|-------------------------------------|
| 276318 | WELL | PR | 10/03/2005 | GW | 045-10441 | WILSON 43A-23-692 | <input checked="" type="checkbox"/> |
| 276319 | WELL | PR | 10/03/2005 | GW | 045-10442 | WILSON 33B-23-692 | <input checked="" type="checkbox"/> |

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: _____ |

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 |
| <input type="checkbox"/> Multiple Spills and Releases? | | | | |

| Fencing/: | | | | |
|------------------|-----------------------------|--------------|-------------------|---------|
| Type | Satisfactory/Unsatisfactory | Comment | Corrective Action | CA Date |
| TANK BATTERY | Satisfactory | cattle panel | | |
| SEPARATOR | Satisfactory | cattle panel | | |
| WELLHEAD | Satisfactory | cattle panel | | |

| Equipment: | | | | | |
|-----------------------------|---|-----------------------------|--------------------------------------|-------------------|---------|
| Type | # | Satisfactory/Unsatisfactory | Comment | Corrective Action | CA Date |
| Plunger Lift | 1 | Satisfactory | | | |
| Gas Meter Run | 1 | Satisfactory | | | |
| Horizontal Heated Separator | 4 | Satisfactory | | | |
| Emission Control Device | 1 | Satisfactory | Could not verify pilot light was on. | | |
| Gathering Line | 1 | Satisfactory | | | |
| Bird Protectors | 6 | Satisfactory | | | |

| | | | | | |
|--------------------|--------------|------------------------------------|---------------------|------------------|--|
| Facilities: | | <input type="checkbox"/> New Tank | Tank ID: _____ | | |
| Contents | # | Capacity | Type | SE GPS | |
| PRODUCED WATER | 1 | 200 BBLS | STEEL AST | | |
| S/U/V: | Satisfactory | Comment: same berm as heated 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 | | | | | |

| | | | | | |
|--------------------|--------------|-----------------------------------|---------------------|------------------------|--|
| Facilities: | | <input type="checkbox"/> New Tank | Tank ID: _____ | | |
| Contents | # | Capacity | Type | SE GPS | |
| METHANOL | 1 | <50 BBLS | STEEL AST | 39.512130, -107.630230 | |
| 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 | 3 | 200 BBLS | HEATED STEEL AST | 39.512290,-107.630200 | |
| S/U/V: | Satisfactory | Comment: | | | |
| Corrective Action: | | | | Corrective Date: | |
| Paint | | | | | |
| Condition | Adequate | | | | |
| Other (Content) | _____ | | | | |
| Other (Capacity) | _____ | | | | |
| Other (Type) | _____ | | | | |
| Berms | | | | | |
| Type | Capacity | Permeability (Wall) | Permeability (Base) | Maintenance | |
| Earth | Adequate | Walls Sufficient | Base Sufficient | Adequate | |
| Corrective Action | | | | Corrective Date | |
| Comment | berm has one low spot that needs maintenance | | | | |
| Venting: | | | | | |
| Yes/No | Comment | | | | |
| YES | bradenheads venting | | | | |
| Flaring: | | | | | |
| Type | Satisfactory/Unsatisfactory | Comment | Corrective Action | CA Date | |
| Ignitor/Combustor | Satisfactory | could not verify pilot light was on | | | |

Predrill

Location ID: 335441

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: 275527 Type: WELL API Number: 045-10340 Status: PR Insp. Status: PR

Producing Well

Comment: plunger lift

Facility ID: 276317 Type: WELL API Number: 045-10440 Status: PR Insp. Status: PR

Producing Well

Comment:

Facility ID: 276318 Type: WELL API Number: 045-10441 Status: PR Insp. Status: PR

Producing Well

Comment:

Facility ID: 276319 Type: WELL API Number: 045-10442 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:

Complaint:

| Tracking Num | Category | Assigned To | Description | Incident Date |
|--------------|----------|-----------------|---|---------------|
| 200127934 | ODOR | KELLERBY, SHAUN | Odor coming from the south of the Enlows home. Odor is described as a "Dirty Water" odor. | 03/14/2008 |

Emission Control Burner (ECB): Y

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? _____ 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? _____ CM _____

CA _____ CA Date _____

1003b. Area no longer in use? Pass Production areas stabilized ? Pass

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: _____

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 _____

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 |
| Culverts | Pass | Ditches | Pass | MHSP | Pass | |
| Ditches | Pass | Check Dams | Pass | | | |
| Rip Rap | Pass | | | | | |
| Sediment Traps | Pass | Culverts | Pass | | | |

S/U/V: Satisfactory Corrective Date: _____

Comment: Some check dams on access road silted in.

CA: _____