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|---|--|--|--|--|---------------------------------------|----|----|----|
| FORM INSP <small>Rev 05/11</small> | State of Colorado | | |  | DE | ET | OE | ES |
| | Oil and Gas Conservation Commission | | | | Inspection Date: <u>08/21/2013</u> | | | |
| <small>1120 Lincoln Street, Suite 801, Denver, Colorado 80203 Phone: (303) 894-2100 Fax: (303) 894-2109</small> | | | | | | | | |

FIELD INSPECTION FORM

| | | | | | |
|---------------------|-------------|--------|-----------------|--------------------|--------------------------|
| Location Identifier | Facility ID | Loc ID | Inspector Name: | On-Site Inspection | <input type="checkbox"/> |
| | 430398 | 430399 | QUINT, CRAIG | 2A Doc Num: | |

Document Number:
668601274

Overall Inspection:
Satisfactory

Operator Information:

OGCC Operator Number: 95620 Name of Operator: WESTERN OPERATING COMPANY

Address: 518 17TH ST STE 200

City: DENVER State: CO Zip: 80202

Contact Information:

| Contact Name | Phone | Email | Comment |
|-----------------|-------------------|----------------------------|---------|
| James, Steven D | (303) 893-2438 | steve@westernoperating.com | |
| Hart, Dale | 719-688-1638 cell | dalehartwoc@fairpoint.net | |

Compliance Summary:

QtrQtr: NWNE Sec: 30 Twp: 12S Range: 52W

| Insp. Date | Doc Num | Insp. Type | Insp Status | Satisfactory /Unsatisfactory | PA P/F/I | Pas/Fail (P/F) | Violation (Y/N) |
|------------|-----------|------------|-------------|------------------------------|----------|----------------|-----------------|
| 02/04/2013 | 668600319 | XX | TA | U | I | | N |

Inspector Comment:

Related Facilities:

| Facility ID | Type | Status | Status Date | Well Class | API Num | Facility Name | |
|-------------|------|--------|-------------|------------|-----------|--------------------|-------------------------------------|
| 430398 | WELL | DG | 12/04/2012 | LO | 073-06485 | CULLEN BOYERO 1-30 | <input checked="" type="checkbox"/> |

Equipment: Location Inventory

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

Location

Lease Road:

| Type | Satisfactory/Unsatisfactory | comment | Corrective Action | Date |
|--------|-----------------------------|----------------------------|-------------------|------|
| Access | Satisfactory | DIRT TRAIL THROUGH PASTURE | | |

Signs/Marker:

| Type | Satisfactory/Unsatisfactory | Comment | Corrective Action | CA Date |
|----------|-----------------------------|---------------|---|------------|
| WELLHEAD | Unsatisfactory | NO LEASE SIGN | Install sign to comply with rule 210.b. | 11/21/2013 |

Inspector Name: QUINT, CRAIG

Emergency Contact Number: (S/U/V) _____ 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 |
| LOCATION | Satisfactory | LOCATION FENCED WITH WIRE | | |

| Venting: | |
|-----------------|---------|
| Yes/No | Comment |
| | |

| Flaring: | | | | |
|-----------------|-----------------------------|---------|-------------------|---------|
| Type | Satisfactory/Unsatisfactory | Comment | Corrective Action | CA Date |
| | | | | |

Predrill

Location ID: 430399

Site Preparation:

Lease Road Adeq.: _____ Pads: _____ Soil Stockpile: _____

Corrective Action: _____ Date: _____ CDP Num.: _____

Form 2A COAs:

| Group | User | Comment | Date |
|-------|----------|---|------------|
| OGLA | allisonr | <p>Water Testing: Prior to drilling, operator shall sample the two (2) closest domestic water wells, springs, or surface water features within a one (1) mile radius of the proposed oil and gas location. Testing preference shall be given to domestic water wells and springs over surface water. Testing of surface water features shall only be conducted if two (2) water wells or springs do not exist within a one (1) mile radius of the selected oil and gas location. If possible, the water wells or springs selected should be on opposite sides of the oil and gas location not exceeding a one (1) mile radius. If water wells or springs on opposite sides of the oil and gas location cannot be identified, then the two (2) closest wells or springs within a one (1) mile radius of the oil and gas location shall be sampled. The sample location shall be surveyed in accordance with Rule 215.</p> <p>Water well testing shall include laboratory analysis of pH, total dissolved solids (TDS), specific conductivity (SC), sodium adsorption ratio (SAR) calculation, total recoverable metals (calcium [Ca], potassium [K], magnesium [Mg], sodium [Na], arsenic [As], boron [B], barium [Ba], cadmium [Cd], chromium [Cr], copper [Cu], iron [Fe], manganese [Mn], lead [Pb], selenium [Se]), cations and anions (bromide [Br], chloride [Cl], fluoride [F], sulfate [SO4]), alkalinity (total, HCO3, and CO3 – all expressed as CaCO3), benzene, toluene, ethyl benzene, o-xylene, m- + p-xylene (BTEX), dissolved methane, diesel range organics (DRO), gasoline range organics (GRO), and nutrients (nitrates, nitrites). Sampling shall be performed by qualified individuals using commonly accepted environmental sampling procedures. Field observations such as pH, temperature, specific conductance, odor, water color, sediment, bubbles, and effervescence shall also be included.</p> <p>Post-completion tests shall be performed for the same analytical parameters listed above and repeated one (1), three (3) and six (6) years thereafter. If no significant changes from the baseline have been identified after the third test (i.e. the six-year test), no further testing shall be required. Additional test(s) may be required if changes in water quality are identified during follow-up testing. The Director may require further water well sampling at any time in response to complaints from water well owners.</p> <p>If free gas or a dissolved methane concentration level greater than one (1) milligrams per liter (mg/l) is detected in a water well, gas compositional analysis and stable isotope analysis of the methane (carbon and deuterium) shall be performed to determine gas type (biogenic or thermogenic). If the methane concentration increases by more than five (5) mg/l between sampling periods, or increases to more than ten (10) mg/l, the operator shall notify the Director and the owner of the water well immediately. If thermogenic methane concentrations increase between sampling periods, the operator shall submit to the Director an action plan to determine the source of the increase.</p> <p>Copies of all test results described above shall be provided to the Director and the landowner where the water quality testing well is located within three (3) months of collecting the samples used for the test. The analytical data and surveyed sample locations shall also be submitted to the Director in an electronic data deliverable format approved by Director.</p> | 10/11/2012 |

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): | | | |
| <u>Surface Owner Contact Information:</u> | | | |
| Name: _____ | | Address: _____ | |
| Phone Number: _____ | | Cell Phone: _____ | |
| <u>Operator Rep. Contact Information:</u> | | | |
| Landman Name: _____ | | Phone Number: _____ | |
| Date Onsite Request Received: _____ | | Date of Rule 306 Consultation: _____ | |
| Request LGD Attendance: _____ | | | |
| <u>LGD Contact Information:</u> | | | |
| Name: _____ | | Phone Number: _____ | Agreed to Attend: _____ |
| <u>Summary of Landowner Issues:</u> | | | |
| | | | |
| <u>Summary of Operator Response to Landowner Issues:</u> | | | |
| | | | |
| <u>Onsite Inspection Memorandum Summarizing Discussions at Inspection as Attachment:</u> | | | |
| | | | |

| Facility | | | | |
|---------------------|------------|-----------------------|------------|------------------|
| Facility ID: 430398 | Type: WELL | API Number: 073-06485 | Status: DG | Insp. Status: TA |

| Idle Well | |
|---|---|
| Purpose: <input type="checkbox"/> Shut In | <input checked="" type="checkbox"/> Temporarily Abandoned |
| S/V: _____ | CA Date: _____ |
| CA: _____ | Reminder: _____ |
| Comment: SHUT IN, WELL WAS DRILLED 12/2012 AND WILL BE REQUIRED TO PASS A MECHANICAL INTEGRITY TEST BY 12/2014. | |

| 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: _____ | _____ | _____ | _____ |

| 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: RANGELAND

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? _____ CM _____
CA _____ CA Date _____

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

1003c. Compacted areas have been cross ripped? _____

1003d. Drilling pit closed? Pass 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? In

Production areas have been stabilized? In Segregated soils have been replaced? Pass

RESTORATION AND REVEGETATION

Cropland

Top soil replaced _____ Recontoured _____ Perennial forage re-established _____

Non-Cropland

Top soil replaced Pass Recontoured Pass 80% Revegetation In

1003 f. Weeds Noxious weeds? _____ P _____

Comment: PITS HAVE BEEN CLOSED, LOCATION IS CONTOURED AND READY TO BE SEEDED.

Overall Interim Reclamation In Process

Final Reclamation/ Abandoned Location:

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

Storm Water:

| 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: