

**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:

08/30/2013

Document Number:

670200806

Overall Inspection:

Unsatisfactory**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection
	<u>293942</u>	<u>335544</u>	<u>BURGER, CRAIG</u>	<input type="checkbox"/> 2A Doc Num: _____

Operator Information:

OGCC Operator Number: 10447 Name of Operator: URSA OPERATING COMPANY LLC

Address: 602 SAWYER STREET #710

City: HOUSTON State: TX Zip: 77007

Contact Information:

Contact Name	Phone	Email	Comment
Kellerby, Shaun		Shaun.Kellerby@state.co.us	NW Field Supervisor
Smith, Cody		csmith@ursaresources.com	
LUJAN, CARLOS		carlos.lujan@state.co.us	
Bleil, Robert		rbleil@ursaresources.com	Regulatory & Environmental Manager

Compliance Summary:

QtrQtr: <u>NESW</u>		Sec: <u>13</u>	Twp: <u>6S</u>		Range: <u>93W</u>		
Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Unsatisfactory	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
06/12/2013	670200562	PR	WK	V			Y
12/19/2008	200201646	PR	WO	S			N
12/19/2008	200201642	PR	WO	S			N

Inspector Comment:**Related Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	
293933	WELL	PR	07/18/2013	GW	045-15166	NORCROSS A16	<input type="checkbox"/>
293934	WELL	PR	07/18/2013	GW	045-15167	NORCROSS A15	<input type="checkbox"/>
293937	WELL	PR	06/13/2011	GW	045-15168	NORCROSS A14	<input type="checkbox"/>
293938	WELL	XX	10/02/2012	LO	045-15169	NORCROSS A13	<input type="checkbox"/>
293939	WELL	XX	10/05/2011	LO	045-15170	NORCROSS A12	<input type="checkbox"/>
293940	WELL	PR	07/18/2013	GW	045-15171	NORCROSS A11	<input type="checkbox"/>
293941	WELL	XX	10/02/2012	LO	045-15172	NORCROSS A10	<input type="checkbox"/>
293942	WELL	PR	07/18/2013	GW	045-15173	NORCROSS A9	<input checked="" type="checkbox"/>
293943	WELL	PR	12/13/2007	GW	045-15174	NORCROSS A8	<input type="checkbox"/>
293944	WELL	PR	03/11/2009	GW	045-15175	NORCROSS A7	<input type="checkbox"/>
293945	WELL	XX	10/05/2011	LO	045-15176	NORCROSS A6	<input type="checkbox"/>
293946	WELL	PR	01/26/2009	GW	045-15177	NORCROSS A5	<input type="checkbox"/>
293947	WELL	PR	12/13/2007	GW	045-15178	NORCROSS A4	<input type="checkbox"/>
293948	WELL	PR	07/28/2010	GW	045-15179	NORCROSS A3	<input type="checkbox"/>

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293949	WELL	PR	12/13/2007	GW	045-15180	NORCROSS A2	
293950	WELL	WO	04/26/2012	GW	045-15181	NORCROSS A1	
298337	WELL	XX	10/02/2012	LO	045-17143	NORCROSS A17	

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	Unsatisfactory	Labels on unused frac tanks. Frac tank used for workover operation does not have a label or placard.	Install sign to comply with rule 210.d.	09/06/2013
WELLHEAD	Satisfactory			
BATTERY	Satisfactory			

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

Corrective Date: _____

Comment: _____

Corrective Action: _____

Good Housekeeping:

Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
STORAGE OF SUPL	Unsatisfactory	Frac tanks on location that are not in use.	Keep location free of unused equipment.	09/27/2013

Spills:

Type	Area	Volume	Corrective action	CA Date
Produced Water	Tank	<= 5 bbls	Stained gravel inside tank battery and outside tank battery at southeast side from spill that occurred on 8/20/13. Spill/release report received by COGCC. Clean up of spill appears to be in progress.	09/20/2013

☐ Multiple Spills and Releases?**Venting:**

Yes/No	Comment
YES	Intermittent venting occurring from open top frac tank. Odors detected on location. Odors not detected at downwind edge of location at time of inspection.

Flaring:

Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date

Predrill

Location ID: 335544

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: 293942 Type: WELL API Number: 045-15173 Status: PR Insp. Status: WK

Workover

Comment: Monument Well Services drilling out isolation plug between old completed interval and recently recompleted upper interval.
 Fat Dog Foam unit with 3 separators and compressors on location to minimize venting.
 Flow occurring to 500 bbl open top tank during periods when gas can not be sent to sales or downhole.

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:

Lat _____ Long _____
 DWR Receipt Num: _____ Owner Name: _____ GPS : _____

Field Parameters:

Sample Location: _____

Emission Control Burner (ECB): Y _____

Comment: _____

Pilot: ON _____ 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? _____ CM _____

CA _____ CA Date _____

Waste Material Onsite? _____ CM _____

CA _____ CA Date _____

Unused or unneeded equipment onsite? _____ 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? _____ 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? _____

Inspector Name: BURGER, CRAIG

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? _____

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
Berms	Pass	Ditches	Pass			
Slope Roughening	Pass	Culverts	Pass			
Gravel	Pass	Check Dams	Pass			
		Waddles	Pass			

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

Comment: _____

CA: _____