

**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 |
|----|----|----|----|

Inspection Date:  
05/14/2014

Document Number:  
673800885

Overall Inspection:  
SATISFACTORY

**FIELD INSPECTION FORM**

|                     |             |        |                 |                          |             |
|---------------------|-------------|--------|-----------------|--------------------------|-------------|
| Location Identifier | Facility ID | Loc ID | Inspector Name: | On-Site Inspection       | 2A Doc Num: |
|                     | 433598      | 433139 | Gomez, Jason    | <input type="checkbox"/> |             |

**Operator Information:**

|                       |   |
|-----------------------|---|
| OGCC Operator Number: | <u>10392</u>  |
| Name of Operator:     | <u>TEKTON WINDSOR LLC</u>                           |
| Address:              | <u>200 PLAZA DR., STE 100</u>                       |
| City:                 | <u>HIGHLANDS</u> State: <u>CO</u> Zip: <u>80129</u> |

- THIS IS A FOLLOW UP INSPECTION
- FOLLOW UP INSPECTION REQUIRED
- NO FOLLOW UP INSPECTION REQUIRED
- INSPECTOR REQUESTS FORM 42 WHEN CORRECTIVE ACTIONS ARE COMPLETED

**Contact Information:**

| Contact Name  | Phone | Email                          | Comment |
|---------------|-------|--------------------------------|---------|
| Sommer, Jerry |       | jerry.sommer@tektionenergy.com |         |

**Compliance Summary:**

QtrQtr: NWSW Sec: 32 Twp: 6N Range: 67W

**Inspector Comment:**

**Related Facilities:**

| Facility ID | Type | Status | Status Date | Well Class | API Num   | Facility Name    | Insp Status |                                     |
|-------------|------|--------|-------------|------------|-----------|------------------|-------------|-------------------------------------|
| 427324      | WELL | PR     | 02/04/2014  | LO         | 123-34945 | PAVISTMA SOUTH 4 | PR          | <input checked="" type="checkbox"/> |
| 427358      | WELL | PR     | 03/17/2014  | LO         | 123-34959 | PAVISTMA SOUTH 5 | PR          | <input checked="" type="checkbox"/> |
| 431531      | WELL | PR     | 02/04/2014  | LO         | 123-36650 | PAVISTMA SOUTH 3 | PR          | <input checked="" type="checkbox"/> |
| 431533      | WELL | PR     | 02/04/2014  | LO         | 123-36652 | PAVISTMA SOUTH 2 | PR          | <input checked="" type="checkbox"/> |
| 433598      | WELL | PR     | 02/04/2014  | LO         | 123-37703 | PAVISTMA SOUTH 1 | PR          | <input checked="" type="checkbox"/> |

**Equipment:**

Location Inventory

|                              |                         |                      |                         |
|------------------------------|-------------------------|----------------------|-------------------------|
| Special Purpose Pits: _____  | Drilling Pits: _____    | Wells: <u>6</u>      | Production Pits: _____  |
| Condensate Tanks: _____      | Water Tanks: <u>3</u>   | Separators: <u>6</u> | Electric Motors: _____  |
| Gas or Diesel Mortors: _____ | Cavity Pumps: _____     | LACT Unit: _____     | Pump Jacks: _____       |
| Electric Generators: _____   | Gas Pipeline: _____     | Oil Pipeline: _____  | Water Pipeline: _____   |
| Gas Compressors: _____       | VOC Combustor: <u>6</u> | Oil Tanks: <u>12</u> | Dehydrator Units: _____ |
| Multi-Well Pits: _____       | Pigging Station: _____  | Flare: _____         | Fuel Tanks: _____       |

**Location**

**Signs/Marker:**

| Type                 | Satisfactory/Action Required | Comment | Corrective Action | CA Date |
|----------------------|------------------------------|---------|-------------------|---------|
| TANK LABELS/PLACARDS | SATISFACTORY                 |         |                   |         |

Inspector Name: Gomez, Jason

|          |                        |                      |                                       |                   |
|----------|------------------------|----------------------|---------------------------------------|-------------------|
| WELLHEAD | <b>ACTION REQUIRED</b> | No signs at wellhead | Install sign to comply with rule 210. | <b>06/30/2014</b> |
| BATTERY  | <b>ACTION REQUIRED</b> | No signs at battey   | Install sign to comply with rule 210. | <b>06/30/2014</b> |

Emergency Contact Number (S/A/V):           ACTION           Corrective Date: 06/30/2014

Comment: **No signs on wellheads**

Corrective Action: **Install signs to comply with COGCC rules**

|  |      |        |                   |         |
|--|------|--------|-------------------|---------|
| <b>Spills:</b>   |      |        |                   |         |
| Type   | Area | Volume | Corrective action | CA Date |
| <input type="checkbox"/> Multiple Spills and Releases? |      |        |                   |         |

|                             |    |                              |                            |                   |         |
|-----------------------------|----|------------------------------|----------------------------|-------------------|---------|
| <b>Equipment:</b>           |    |                              |                            |                   |         |
| Type                        | #  | Satisfactory/Action Required | Comment                    | Corrective Action | CA Date |
| Ancillary equipment         | 1  | SATISFACTORY                 | <b>Electrical Boxes</b>    |                   |         |
| Veritcal Heater Treater     | 2  | SATISFACTORY                 |                            |                   |         |
| Ancillary equipment         | 1  | SATISFACTORY                 | <b>Solar Panel</b>         |                   |         |
| Bird Protectors             | 15 | SATISFACTORY                 |                            |                   |         |
| Horizontal Heated Separator | 5  | SATISFACTORY                 |                            |                   |         |
| Ancillary equipment         | 6  | SATISFACTORY                 | <b>Drop out pots</b>       |                   |         |
| Ancillary equipment         | 4  | SATISFACTORY                 | <b>Methonal pumps</b>      |                   |         |
| VRU                         | 3  | SATISFACTORY                 |                            |                   |         |
| Emission Control Device     | 10 | SATISFACTORY                 |                            |                   |         |
| Ancillary equipment         | 1  | SATISFACTORY                 | <b>Telemetry Equipment</b> |                   |         |
| Horizontal Separator        | 1  | SATISFACTORY                 |                            |                   |         |
| Plunger Lift                | 5  | SATISFACTORY                 |                            |                   |         |
| LACT                        | 1  | SATISFACTORY                 |                            |                   |         |
| Gas Meter Run               | 7  | SATISFACTORY                 |                            |                   |         |

|                    |              |                                   |                     |                       |
|--------------------|--------------|-----------------------------------|---------------------|-----------------------|
| <b>Facilities:</b> |              | <input type="checkbox"/> New Tank | Tank ID: _____      |                       |
| Contents           | #            | Capacity                          | Type                | SE GPS                |
| PRODUCED WATER     | 2            | 300 BBLS                          | STEEL AST           | 40.439170,-104.924840 |
| S/A/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>Facilities:</b> |              | <input type="checkbox"/> New Tank | Tank ID: _____      |                       |
| Contents           | #            | Capacity                          | Type                | SE GPS                |
| CRUDE OIL          | 10           | 400 BBLS                          | STEEL AST           | 40.439170,-104.924840 |
| S/A/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/Action Required | Comment | Corrective Action | CA Date |
|                 |                              |         |                   |         |

|                          |  |             |  |                       |
|--------------------------|--|-------------|--|-----------------------|
| <b>Predrill</b>          |  |             |  |                       |
| Location ID: 433598      |  |             |  |                       |
| <b>Site Preparation:</b> |  |             |  |                       |
| Lease Road Adeq.: _____  |  | Pads: _____ |  | Soil Stockpile: _____ |

**S/AV:** \_\_\_\_\_

Corrective Action: \_\_\_\_\_ Date: \_\_\_\_\_ CDP Num.: \_\_\_\_\_

**Form 2A COAs:**

| Group        | User     | Comment  | Date       |
|--------------|----------|--|------------|
| OGLA         | deranleg | Permanent equipment on location shall be muffled to reduce noise, or shall be buffered on the north and east sides.  | 05/30/2013 |
| OGLA         | deranleg | Operator shall provide signage at the Junction of the access road leading to the pad and Weld County Road 62. The signage shall provide the following information at a minimum: 1. Contact information for Tekton Windsor, 2. Contact information for the COGCC complaint line, 3. Number of planned wells, and 4. Anticipated Schedule (From pad construction through final battery construction).    | 05/30/2013 |
| Final Review | deranleg | The approval of this Form 2A is conditional upon approval of the related Form 4, Sundry Notices to move the approved wells to this surface location. No construction is authorized prior to approval of Doc #s 400412681, 400412883, 400412952, and 400413029 for the Pavistma 5 1-5-32-090-NH, Pavistma 4 1-6-32-90-NH, Frye Farms 5 7-9-32-270-4-NH, and Frye Farms 1 7-8-32-270-4-NH, respectively. | 05/30/2013 |
| OGLA         | deranleg | Temporary engineering controls (consisting of perimeter sound walls, earthen berms, stacked hay bales and/or metal, synthetic or wood sheeting) shall be used on the north and east perimeters of the location during drilling and completion activities to provide noise relief to nearby residents. The COGCC may require additional noise mitigation if measures taken are deemed insufficient.     | 05/30/2013 |
| OGLA         | deranleg | Lighting abatement measures beyond the requirements of Rule 803. shall be implemented, including the following, at a minimum: (1) rig oriented to direct light away from nearby residents; (2) install lighting shield devices on all of the more conspicuous lights; (3) low density sodium lighting; and (4) rig shrouded on the north and east sides.   | 05/30/2013 |
| OGLA         | deranleg | Provide temporary engineering controls to prevent uncontrolled public access during drilling and completion activities.  | 05/30/2013 |

**S/AV:** \_\_\_\_\_ **Comment:** \_\_\_\_\_

**CA:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Wildlife BMPs:**

| BMP Type | Comment   |
|----------|---|
| Planning | Access point to this site already exists and is from a county road. Operator will comply with COGCC Rule 1002.f(2).F concerning vehicle tracking control practices in order to control, alleviate or mitigate sediment discharges from the access road onto WCR 62 / Crossroads Blvd. |

**S/AV:** \_\_\_\_\_ **Comment:** \_\_\_\_\_

**CA:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Stormwater:**

**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: \_\_\_\_\_

Inspector Name: Gomez, Jason

**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: 427324 Type: WELL API Number: 123-34945 Status: PR Insp. Status: PR

**Producing Well**

Comment: **PR**

Facility ID: 427358 Type: WELL API Number: 123-34959 Status: PR Insp. Status: PR

**Producing Well**

Comment: **PR**

Facility ID: 431531 Type: WELL API Number: 123-36650 Status: PR Insp. Status: PR

**Producing Well**

Comment: **PR**

Facility ID: 431533 Type: WELL API Number: 123-36652 Status: PR Insp. Status: PR

**Producing Well**

Comment: **PR**

Facility ID: 433598 Type: WELL API Number: 123-37703 Status: PR Insp. Status: PR

**Producing Well**

Comment: **PR**

**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): \_\_\_\_\_

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

Pilot: \_\_\_\_\_ Wildlife Protection Devices (fired vessels): \_\_\_\_\_

**Reclamation - Storm Water - Pit**

**Interim Reclamation:**

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

Land Use: DRY LAND

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? \_\_\_\_\_

**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: DRY LAND

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

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

Well plugged \_\_\_\_\_ Pit mouse/rat holes, cellars backfilled \_\_\_\_\_

Inspector Name: Gomez, Jason

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 \_\_\_\_\_ Well Release on Active Location  Multi-Well Location

**Storm Water:**

| Loc Erosion BMPs | BMP Maintenance | Lease Road Erosion BMPs | Lease BMP Maintenance | Chemical BMPs | Chemical BMP Maintenance | Comment |
|------------------|-----------------|-------------------------|-----------------------|---------------|--------------------------|---------|
| Gravel           | Pass            |                         |                       |               |                          |         |

S/A/V: **ACTION REQUIRED** Corrective Date: **05/28/2014**  
Comment: **Standing water on location**  
CA: **Submit plan to resolve standing water issue on location**

**Pits:**  NO SURFACE INDICATION OF PIT