

**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:
11/20/2014Document Number:
666800310Overall Inspection:
SATISFACTORY**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	293950	335544	Murray, Richard	<input type="checkbox"/>	

Operator Information:OGCC Operator Number: 10447Name of Operator: URSA OPERATING COMPANY LLCAddress: 602 SAWYER STREET #710City: HOUSTON State: TX Zip: 77007

- ☐ 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
Kellerby, Shaun		shaun.kellerby@state.us.co	
Younger, Pake	970-329-4385	pyounger@ursaresources.com	
Bleil, Robert		rbleil@ursaresources.com	Regulatory & Environmental Manager

Compliance Summary:QtrQtr: NWSW Sec: 13 Twp: 6S Range: 93W

Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Action Required	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
09/05/2013	670200819			SATISFACTORY			No
02/28/2012	661400087	XX	TA	SATISFACTORY			No
01/27/2012	661400051	XX	TA	ACTION REQUIRED			No
04/07/2010	200241642	ES	AO	SATISFACTORY	I		No
12/19/2008	200201619	PR	WO	SATISFACTORY			No

Inspector Comment:**Related Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status	
293933	WELL	PR	07/18/2013	GW	045-15166	NORCROSS A16	PR	<input checked="" type="checkbox"/>
293934	WELL	PR	07/18/2013	GW	045-15167	NORCROSS A15	PR	<input checked="" type="checkbox"/>
293937	WELL	PR	06/13/2011	GW	045-15168	NORCROSS A14	PR	<input checked="" type="checkbox"/>
293938	WELL	XX	10/02/2012	LO	045-15169	NORCROSS A13	XX	<input type="checkbox"/>
293939	WELL	XX	10/05/2011	LO	045-15170	NORCROSS A12	XX	<input type="checkbox"/>
293940	WELL	PR	07/18/2013	GW	045-15171	NORCROSS A11	PR	<input checked="" type="checkbox"/>

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293941	WELL	XX	10/02/2012	LO	045-15172	NORCROSS A10	XX	<input type="checkbox"/>
293942	WELL	PR	07/18/2013	GW	045-15173	NORCROSS A9	PR	<input checked="" type="checkbox"/>
293943	WELL	PR	12/13/2007	GW	045-15174	NORCROSS A8	PR	<input checked="" type="checkbox"/>
293944	WELL	PR	03/11/2009	GW	045-15175	NORCROSS A7	PR	<input checked="" type="checkbox"/>
293945	WELL	XX	10/05/2011	LO	045-15176	NORCROSS A6	XX	<input type="checkbox"/>
293946	WELL	PR	01/26/2009	GW	045-15177	NORCROSS A5	PR	<input checked="" type="checkbox"/>
293947	WELL	PR	12/13/2007	GW	045-15178	NORCROSS A4	PR	<input checked="" type="checkbox"/>
293948	WELL	PR	07/28/2010	GW	045-15179	NORCROSS A3	PR	<input checked="" type="checkbox"/>
293949	WELL	PR	12/13/2007	GW	045-15180	NORCROSS A2	PR	<input checked="" type="checkbox"/>
293950	WELL	WO	04/26/2012	GW	045-15181	NORCROSS A1	WO	<input checked="" type="checkbox"/>
298337	WELL	AL	11/13/2014	LO	045-17143	NORCROSS A17	AL	<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: _____

LocationEmergency Contact Number (S/A/V): SATISFACTORY

Corrective Date: _____

Comment: Corrective Action: **Spills:**

Type	Area	Volume	Corrective action	CA Date
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☐ Multiple Spills and Releases?**Facilities:**☐ New Tank

Tank ID: _____

Contents	#	Capacity	Type	SE GPS
PRODUCED WATER	2	300 BBLS	STEEL AST	,

S/A/V: SATISFACTORY Comment: **Centralized battery**Corrective Action: Corrective Date: **Paint**

Condition	Adequate
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Other (Content) _____

Other (Capacity) _____

Inspector Name: Murray, Richard

Other (Type) _____

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance

Corrective Action		Corrective Date	
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Comment	
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Facilities: ☐ New Tank Tank ID: _____

Contents	#	Capacity	Type	SE GPS
CONDENSATE	3	300 BBLS	STEEL AST	39.522820,-107.728200

S/A/V: SATISFACTORY	Comment:	
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Corrective Action:		Corrective Date:	
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Paint

Condition	Adequate
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Other (Content) _____

Other (Capacity) _____

Other (Type) _____

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Metal	Adequate	Walls Sufficient	Base Sufficient	Adequate

Corrective Action		Corrective Date	
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Comment	
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Venting:

Yes/No	Comment
NO	

Flaring:

Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date

Predrill

Location ID: 293950

Site Preparation:

Lease Road Adeq.: _____

Pads: _____

Soil Stockpile: _____

S/A/V: _____

Corrective Action: _____

Date: _____ CDP Num.: _____

Form 2A COAs:**S/A/V:** _____ **Comment:** _____**CA:** _____ **Date:** _____**Wildlife BMPs:****S/A/V:** _____ **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: _____

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: 293933 Type: WELL API Number: 045-15166 Status: PR Insp. Status: PR

Producing Well

Comment: Plunger lift

Facility ID: 293934 Type: WELL API Number: 045-15167 Status: PR Insp. Status: PR

Producing Well

Comment: Plunger lift

Facility ID: 293937 Type: WELL API Number: 045-15168 Status: PR Insp. Status: PR

Producing Well

Comment: Plunger lift

Facility ID: 293940	Type: WELL	API Number: 045-15171	Status: PR	Insp. Status: PR
Producing Well				
Comment: Plunger lift				

Facility ID: 293942	Type: WELL	API Number: 045-15173	Status: PR	Insp. Status: PR
Producing Well				
Comment: Plunger lift				

Facility ID: 293943	Type: WELL	API Number: 045-15174	Status: PR	Insp. Status: PR
Producing Well				
Comment: Plunger lift				

Facility ID: 293944	Type: WELL	API Number: 045-15175	Status: PR	Insp. Status: PR
Producing Well				
Comment: Plunger lift				

Facility ID: 293946	Type: WELL	API Number: 045-15177	Status: PR	Insp. Status: PR
Producing Well				
Comment: Plunger lift				

Facility ID: 293947	Type: WELL	API Number: 045-15178	Status: PR	Insp. Status: PR
Producing Well				
Comment: Plunger lift				

Facility ID: 293948	Type: WELL	API Number: 045-15179	Status: PR	Insp. Status: PR
Producing Well				
Comment: Plunger lift				

Facility ID: 293949	Type: WELL	API Number: 045-15180	Status: PR	Insp. Status: PR
Producing Well				
Comment: Plunger lift				

Facility ID: 293950	Type: WELL	API Number: 045-15181	Status: WO	Insp. Status: WO
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Facility ID: 298337	Type: WELL	API Number: 045-17143	Status: AL	Insp. Status: AL
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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 _____

Inspector Name: Murray, Richard

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? _____

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 _____

Inspector Name: Murray, Richard

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 _____

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

S/A/V: SATISFACTOR
Y _____

Corrective Date: _____

Comment: _____

CA: _____

Pits: ☒ NO SURFACE INDICATION OF PIT