

**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:
11/21/2014Document Number:
666800315Overall Inspection:
SATISFACTORY**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	285155	311651	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
Bleil, Robert		rbleil@ursaresources.com	Regulatory & Environmental Manager
Kellerby, Shaun		shaun.kellerby@state.us.co	
Younger, Pake	970-329-4385	pyounger@ursaresources.com	

Compliance Summary:

QtrQtr: <u>NWNW</u>		Sec: <u>13</u>	Twp: <u>6S</u>	Range: <u>93W</u>			
Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Action Required	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
12/10/2010	200287152	PR	PR	SATISFACTORY			No

Inspector Comment:**Related Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status	
283411	WELL	PR	10/25/2006	GW	045-11917	SNYDER A 1	PR	<input checked="" type="checkbox"/>
285152	WELL	PR	06/05/2007	GW	045-12398	SNYDER A10	PR	<input checked="" type="checkbox"/>
285153	WELL	PR	10/13/2011	GW	045-12397	SNYDER A3	PR	<input checked="" type="checkbox"/>
285154	WELL	PR	06/05/2007	GW	045-12396	SNYDER A4	PR	<input checked="" type="checkbox"/>
285155	WELL	PR	12/11/2007	GW	045-12395	SNYDER A5	PR	<input checked="" type="checkbox"/>
285156	WELL	PR	10/01/2012	GW	045-12394	SNYDER A9	PR	<input checked="" type="checkbox"/>
289759	WELL	XX	09/26/2011	LO	045-13874	Snyder A2	XX	<input checked="" type="checkbox"/>
289760	WELL	XX	09/26/2011	LO	045-13873	Snyder A8	XX	<input checked="" type="checkbox"/>
289761	WELL	PR	11/04/2011	GW	045-13872	SNYDER A7	PR	<input checked="" type="checkbox"/>

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289762	WELL	XX	09/26/2011	LO	045-13871	Snyder A6	XX	X
290978	WELL	PR	03/30/2012	GW	045-14241	SNYDER A11	PR	X
292322	WELL	XX	08/28/2009	GW	045-14680	Snyder A15	XX	X
292323	WELL	XX	09/26/2011	LO	045-14679	Snyder A14	XX	X
292324	WELL	PR	09/19/2007	GW	045-14678	SNYDER A13	PR	X
292325	WELL	PR	09/19/2007	GW	045-14677	SNYDER A12	PR	X
413201	WELL	XX	09/26/2011	LO	045-18738	Snyder A19	XX	X
413202	WELL	XX	09/26/2011	LO	045-18736	Snyder A17	XX	X
413203	WELL	XX	09/26/2011	LO	045-18737	Snyder A18	XX	X

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

Emergency 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?

Venting:

Yes/No	Comment
NO	

Flaring:

Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date

Predrill

Location ID: 285155

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: 283411 Type: WELL API Number: 045-11917 Status: PR Insp. Status: PR

Producing Well

Comment: Plunger lift

Facility ID: 285152 Type: WELL API Number: 045-12398 Status: PR Insp. Status: PR

Producing Well

Comment: Plunger lift

Facility ID: 285153 Type: WELL API Number: 045-12397 Status: PR Insp. Status: PR

Producing Well

Comment: Plunger lift

Facility ID:	285154	Type:	WELL	API Number:	045-12396	Status:	PR	Insp. Status:	PR
<div>Producing Well</div> <div>Comment: Plunger lift</div>									
Facility ID:	285155	Type:	WELL	API Number:	045-12395	Status:	PR	Insp. Status:	PR
<div>Producing Well</div> <div>Comment: Plunger lift</div>									
Facility ID:	285156	Type:	WELL	API Number:	045-12394	Status:	PR	Insp. Status:	PR
<div>Producing Well</div> <div>Comment: Plunger lift</div>									
Facility ID:	289759	Type:	WELL	API Number:	045-13874	Status:	XX	Insp. Status:	XX
Facility ID:	289760	Type:	WELL	API Number:	045-13873	Status:	XX	Insp. Status:	XX
Facility ID:	289761	Type:	WELL	API Number:	045-13872	Status:	PR	Insp. Status:	PR
<div>Producing Well</div> <div>Comment: Plunger lift</div>									
Facility ID:	289762	Type:	WELL	API Number:	045-13871	Status:	XX	Insp. Status:	XX
Facility ID:	290978	Type:	WELL	API Number:	045-14241	Status:	PR	Insp. Status:	PR
<div>Producing Well</div> <div>Comment: Plunger lift</div>									
Facility ID:	292322	Type:	WELL	API Number:	045-14680	Status:	XX	Insp. Status:	XX
Facility ID:	292323	Type:	WELL	API Number:	045-14679	Status:	XX	Insp. Status:	XX
Facility ID:	292324	Type:	WELL	API Number:	045-14678	Status:	PR	Insp. Status:	PR
<div>Producing Well</div> <div>Comment: Plunger lift</div>									
Facility ID:	292325	Type:	WELL	API Number:	045-14677	Status:	PR	Insp. Status:	PR
<div>Producing Well</div> <div>Comment: Plunger lift</div>									
Facility ID:	413201	Type:	WELL	API Number:	045-18738	Status:	XX	Insp. Status:	XX
Facility ID:	413202	Type:	WELL	API Number:	045-18736	Status:	XX	Insp. Status:	XX
Facility ID:	413203	Type:	WELL	API Number:	045-18737	Status:	XX	Insp. Status:	XX
<div>Environmental</div>									

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? _____

RESTORATION AND REVEGETATION

Inspector Name: Murray, Richard

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 _____

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: _____ Corrective Date: _____

Comment: _____

CA: _____

Pits: ☐ NO SURFACE INDICATION OF PIT