

**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:

02/12/2015

Document Number:

666800647

Overall Inspection:

SATISFACTORY**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	295434	335470	Murray, Richard	<input type="checkbox"/>	

Operator Information:OGCC Operator Number: 10531Name of Operator: VANGUARD OPERATING LLCAddress: 5847 SAN FELIPE #3000City: HOUSTON State: TX Zip: 77057

- ☒ 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
Collett, Shane		scollett@vnrlc.com	Superintendent Operations
Pitt, Carmen		cpitt@vnrlc.com	Sr. EH&S
Ghan, Scott		sghan@vnrlc.com	Sr. EH&S
Axelsson, Aaron	970-230-0926	aaxelson@vnrlc.com	Sr. Production Foreman

Compliance Summary:QtrQtr: SESE Sec: 20 Twp: 6S Range: 92W

Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Action Required	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
01/27/2015	666800557	PR	PR	ACTION REQUIRED			No
03/29/2013	670200301	PR	PR	SATISFACTORY			No
12/12/2010	200291154	PR	PR	SATISFACTORY			No

Inspector Comment:Action required items noted in previous inspection have been satisfied, No form 42 is required**Related Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status	
295434	WELL	PR	10/08/2008	GW	045-15750	SPECIALTY 34A-20-692	PR	<input checked="" type="checkbox"/>
295435	WELL	PR	10/20/2008	GW	045-15751	SPECIALTY 44B-20-692	PR	<input checked="" type="checkbox"/>
295436	WELL	PR	10/22/2008	GW	045-15752	SPECIALTY 34D-20-692	PR	<input checked="" type="checkbox"/>
295437	WELL	PR	10/11/2008	GW	045-15753	SPECIALTY 34C-20-692	PR	<input checked="" type="checkbox"/>
295438	WELL	PR	10/31/2008	GW	045-15754	SPECIALTY 34B-20-692	PR	<input checked="" type="checkbox"/>
295439	WELL	PR	10/17/2008	GW	045-15755	SPECIALTY 44D-20-692	PR	<input checked="" type="checkbox"/>
295440	WELL	PR	10/18/2008	GW	045-15756	SPECIALTY 44C-20-692	PR	<input checked="" type="checkbox"/>

Inspector Name: Murray, Richard

295441	WELL	PR	10/16/2008	GW	045-15757	SPECIALTY 44A-20-692	PR	<input checked="" type="checkbox"/>
295442	WELL	PR	10/21/2008	GW	045-15758	SPECIALTY 43C-20-692	PR	<input checked="" type="checkbox"/>
295443	WELL	PR	10/22/2008	GW	045-15759	SPECIALTY 43A-20-692	PR	<input checked="" type="checkbox"/>
295444	WELL	PR	10/23/2008	GW	045-15760	SPECIALTY 33C-20-692	PR	<input checked="" type="checkbox"/>
295445	WELL	PR	10/24/2008	GW	045-15761	SPECIALTY 33A-20-692	PR	<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: _____

Location

Signs/Marker:

Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
TANK LABELS/PLACARDS	SATISFACTORY			
WELLHEAD	SATISFACTORY			
BATTERY	SATISFACTORY			

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
YES	Bradenhead valves open

Flaring:

Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
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Predrill

Location ID: 295434

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: 295434 Type: WELL API Number: 045-15750 Status: PR Insp. Status: PR

Producing Well

Comment: Plunger lift

Facility ID: 295435 Type: WELL API Number: 045-15751 Status: PR Insp. Status: PR

Producing Well

Comment: Plunger lift

Facility ID: 295436 Type: WELL API Number: 045-15752 Status: PR Insp. Status: PR

Producing Well

Comment: Plunger lift

Facility ID: 295437	Type: WELL	API Number: 045-15753	Status: PR	Insp. Status: PR
Producing Well				
Comment: Plunger lift				

Facility ID: 295438	Type: WELL	API Number: 045-15754	Status: PR	Insp. Status: PR
Producing Well				
Comment: Plunger lift				

Facility ID: 295439	Type: WELL	API Number: 045-15755	Status: PR	Insp. Status: PR
Producing Well				
Comment: Plunger lift				

Facility ID: 295440	Type: WELL	API Number: 045-15756	Status: PR	Insp. Status: PR
Producing Well				
Comment: Plunger lift				

Facility ID: 295441	Type: WELL	API Number: 045-15757	Status: PR	Insp. Status: PR
Producing Well				
Comment: Plunger lift				

Facility ID: 295442	Type: WELL	API Number: 045-15758	Status: PR	Insp. Status: PR
Producing Well				
Comment: Plunger lift				

Facility ID: 295443	Type: WELL	API Number: 045-15759	Status: PR	Insp. Status: PR
Producing Well				
Comment: Plunger lift				

Facility ID: 295444	Type: WELL	API Number: 045-15760	Status: PR	Insp. Status: PR
Producing Well				
Comment: Plunger lift				

Facility ID: 295445	Type: WELL	API Number: 045-15761	Status: PR	Insp. Status: PR
Producing Well				
Comment: Plunger lift				

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? 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? Pass CM _____
CA _____ CA Date _____

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

1003c. Compacted areas have been cross ripped? Pass _____

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? _____

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
		Ditches	Pass			
Berms	Pass					
		Check Dams	Pass			
Seeding	Pass					
		Culverts	Pass			

S/A/V: SATISFACTOR
Y _____

Corrective Date: _____

Comment: _____

CA: _____

Pits: ☐ NO SURFACE INDICATION OF PIT