

**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:

02/25/2015

Document Number:

673900763

Overall Inspection:

ACTION REQUIRED**FIELD INSPECTION FORM**

| | | | | | |
|---------------------|-------------|--------|-----------------|--------------------------|-------------|
| Location Identifier | Facility ID | Loc ID | Inspector Name: | On-Site Inspection | 2A Doc Num: |
| | 420206 | 420207 | Rains, Bill | <input type="checkbox"/> | |

Operator Information:OGCC Operator Number: 10472Name of Operator: OUTLAW OPERATING LTDAddress: 6860 S YOSEMITE CT #2000City: CENTENNIAL State: CO Zip: 80112

- ☐ 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 |
|---------------|--------------|---------------------------|-----------------|
| Reeves, Shane | 303-683-8218 | shane@outlawoperating.com | All Inspections |

Compliance Summary:QtrQtr: SESE Sec: 36 Twp: 10N Range: 61W**Inspector Comment:****Related Facilities:**

| Facility ID | Type | Status | Status Date | Well Class | API Num | Facility Name | Insp Status | |
|-------------|------|--------|-------------|------------|-----------|------------------------|-------------|-------------------------------------|
| 420206 | WELL | PR | 02/24/2012 | OW | 123-32505 | Birds of Prey 36-10-61 | TA | <input checked="" type="checkbox"/> |

Equipment:Location Inventory

| | | | |
|---------------------------------|-------------------------|----------------------|-------------------------|
| Special Purpose Pits: _____ | Drilling Pits: <u>1</u> | Wells: <u>1</u> | Production Pits: _____ |
| Condensate Tanks: _____ | Water Tanks: <u>1</u> | Separators: <u>1</u> | Electric Motors: _____ |
| Gas or Diesel Mortors: <u>1</u> | Cavity Pumps: _____ | LACT Unit: _____ | Pump Jacks: <u>1</u> |
| Electric Generators: _____ | Gas Pipeline: <u>1</u> | Oil Pipeline: _____ | Water Pipeline: _____ |
| Gas Compressors: _____ | VOC Combustor: <u>1</u> | Oil Tanks: <u>2</u> | Dehydrator Units: _____ |
| Multi-Well Pits: _____ | Pigging Station: _____ | Flare: _____ | Fuel Tanks: _____ |

Location**Lease Road:**

| Type | Satisfactory/Action Required | comment | Corrective Action | Date |
|--------|------------------------------|-------------------------------------|-----------------------|-------------------|
| Access | ACTION REQUIRED | ACCESS ROAD COVERED IN WEEDS | MAINTAIN WEEDS | 04/30/2015 |

Inspector Name: Rains, Bill

| Signs/Marker: | | | | |
|----------------------|------------------------------|---------------------------------|---------------------------------------|------------|
| Type | Satisfactory/Action Required | Comment | Corrective Action | CA Date |
| TANK LABELS/PLACARDS | ACTION REQUIRED | NO LABELS AND PLACARDS ON TANKS | Install sign to comply with rule 210. | 04/30/2015 |
| BATTERY | SATISFACTORY | | | |

Emergency Contact Number (S/A/V): ACTION Corrective Date: 04/30/2015

Comment: 911 IS NOT A ADEQUATE CONTACT NUMBER. NEED A 24HR LIVE CONTACT NUMBER.

Corrective Action: INSTALL PROPER EMERGENCY NUMBER

| Good Housekeeping: | | | | |
|---------------------------|------------------------------|--|-------------------------|------------|
| Type | Satisfactory/Action Required | Comment | Corrective Action | CA Date |
| WEEDS | ACTION REQUIRED | WEEDS ON LOCATION. SEE ATTACHMENT | MAINTAIN WEEDS | 04/30/2015 |
| UNUSED EQUIPMENT | ACTION REQUIRED | UNUSED EQUIPMENT ON LOCATION. SEE ATTACHMENT | REMOVE UNUSED EQUIPMENT | 04/30/2015 |

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

| Fencing/: | | | | |
|------------------|------------------------------|---------|-------------------|---------|
| Type | Satisfactory/Action Required | Comment | Corrective Action | CA Date |
| LOCATION | SATISFACTORY | | | |

| Equipment: | | | | | |
|-------------------------|---|------------------------------|-----------------------|---|------------|
| Type | # | Satisfactory/Action Required | Comment | Corrective Action | CA Date |
| Emission Control Device | 1 | SATISFACTORY | | | |
| Bird Protectors | 2 | SATISFACTORY | | | |
| Veritcal Heater Treater | 1 | SATISFACTORY | | | |
| Flare | 1 | SATISFACTORY | | | |
| Pump Jack | 1 | ACTION REQUIRED | PUMPJACK DISCONNECTED | RECONNECT OR REMOVE AS UNUSED EQUIPMENT | 04/30/2015 |
| Prime Mover | 1 | SATISFACTORY | GAS ENGINE | | |
| Deadman # & Marked | 4 | SATISFACTORY | | | |

Facilities: ☐ New Tank Tank ID: _____

| Contents | # | Capacity | Type | SE GPS |
|-----------|---|----------|-----------|-----------------------|
| CRUDE OIL | 2 | 400 BBLS | STEEL AST | 40.786160,-104.146120 |

S/A/V: SATISFACTORY Comment: _____

Corrective Action: _____ Corrective Date: _____

Paint

Inspector Name: Rains, Bill

| | | | | |
|-------------------|------------------------------|---------------------|---------------------|----------------------------|
| Condition | Adequate | | | |
| Other (Content) | | | | |
| Other (Capacity) | | | | |
| Other (Type) | | | | |
| <u>Berms</u> | | | | |
| Type | Capacity | Permeability (Wall) | Permeability (Base) | Maintenance |
| Earth | Inadequate | Walls Insufficient | Base Insufficient | Inadequate |
| Corrective Action | MAINTAIN BERMS | | | Corrective Date 04/30/2015 |
| Comment | BERMS | | | |
| <u>Venting:</u> | | | | |
| Yes/No | Comment | | | |
| NO | | | | |
| <u>Flaring:</u> | | | | |
| Type | Satisfactory/Action Required | Comment | Corrective Action | CA Date |
| | | | | |

Inspector Name: Rains, Bill

Predrill

Location ID: 420206

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: 420206 Type: WELL API Number: 123-32505 Status: PR Insp. Status: TA

Idle Well

Purpose: ☐ Shut In ☒ Temporarily Abandoned Reminder: _____

S/A/V: ACTION CA Date: _____

CA: _____

Comment: _____

BradenHeadComment: **BRANDENHEAD NOT EXSPODED TO SURFACE**

CA: _____

CA Date: _____

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: **WELL SHUT IN**Pilot: OFF Wildlife Protection Devices (fired vessels): YES**Reclamation - Storm Water - Pit****Interim Reclamation:**

Date Interim Reclamation Started: _____ Date Interim Reclamation Completed: _____

Land Use: RANGELAND

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? _____

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1003d. Drilling pit closed? Pass Subsidence over on drill pit? Pass
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: RANGELAND
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 |
|------------------|-----------------|-------------------------|-----------------------|---------------|--------------------------|---------|
| Gravel | Pass | Gravel | Pass | | | |

S/A/V: SATISFACTOR Corrective Date: _____
Y
Comment: _____
CA: _____

Pits: ☒ NO SURFACE INDICATION OF PIT

Attached Documents

You can go to COGCC Images ([https://cogcc.state.co.us/weblink/](https://cogcc.state.co.us/webblink/)) and search by document number:

Inspector Name: Rains, Bill

| Document Num | Description | URL |
|--------------|--|---|
| 673900831 | WEEDS | http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3574847 |
| 673900832 | SIGN | http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3574848 |
| 673900833 | WEEDS, PUMPJACK AND UNUSED EQUIPMENT | http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3574849 |
| 673900834 | PLACARDING | http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3574850 |

ACTION REQUIRED

ANY ACTION REQUIRED items listed on this report indicate that the oil and gas facility or the oil and gas operations listed on the report may be in violation of the rules and regulations of the Colorado Oil and Conservation Commission (“COGCC”) and corrective action is required.

There is reasonable cause to believe that a violation of the Oil and Gas Conservation Act, or of any rule, regulation, or order of the Commission, or of any permit issued by the Commission, has occurred. The Operator’s compliance with this Inspection Report is required to resolve these alleged violations. This document requires the Operator to timely respond to the COGCC and to comply with directives as listed by the **Corrective Action Deadline Date**. Failure to do so will result in the issuance of a Notice of Alleged Violation and initiation of enforcement proceedings in which COGCC will seek monetary penalties for the alleged violations pursuant to § 34-60-121, C.R.S. and Rule 523, COGCC Rules of Practice and Procedure, 2 CCR 404-1. (Please note that the COGCC's penalty authority was recently increased to a maximum of \$15,000 per day and penalties are no longer capped at a maximum of \$10,000 per violation.)