

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



| | | | |
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| DE | ET | OE | ES |
|----|----|----|----|

Inspection Date:
04/13/2015

Document Number:
675201434

Overall Inspection:
SATISFACTORY

FIELD INSPECTION FORM

| | | | | | |
|---------------------|---------------|---------------|------------------------|--------------------------|-------------|
| Location Identifier | Facility ID | Loc ID | Inspector Name: | On-Site Inspection | 2A Doc Num: |
| | <u>334487</u> | <u>334487</u> | <u>CONKLIN, CURTIS</u> | <input type="checkbox"/> | |

Operator Information:

| | |
|-----------------------|--|
| OGCC Operator Number: | <u>10433</u> |
| Name of Operator: | <u>PICEANCE ENERGY LLC</u> |
| Address: | <u>1512 LARIMER STREET #1000</u> |
| City: | <u>DENVER</u> State: <u>CO</u> Zip: <u>80202</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 |
|----------------|----------------|-----------------------------|---|
| Bankert, Wayne | (970) 683-5419 | wbankert@laramie-energy.com | Senior Regulatory & Environmental Coordinator |

Compliance Summary:

| QtrQtr: | <u>NWSW</u> | Sec: | <u>26</u> | Twp: | <u>9S</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) |
| 11/22/2014 | 675200807 | | | SATISFACTORY | | | No |

Inspector Comment:

Related Facilities:

| Facility ID | Type | Status | Status Date | Well Class | API Num | Facility Name | Insp Status | |
|-------------|------|--------|-------------|------------|-----------|-------------------|-------------|-------------------------------------|
| 290618 | WELL | PR | 05/16/2007 | GW | 077-09287 | NORTH VEGA 26-221 | PR | <input checked="" type="checkbox"/> |
| 291546 | WELL | PR | 11/13/2012 | GW | 077-09361 | DELTA 26-231 | PR | <input checked="" type="checkbox"/> |
| 291547 | WELL | PR | 07/24/2007 | GW | 077-09360 | DELTA 26-241 | PR | <input checked="" type="checkbox"/> |
| 291548 | WELL | PR | 07/24/2007 | GW | 077-09359 | DELTA 26-224 | PR | <input checked="" type="checkbox"/> |
| 291549 | WELL | PR | 07/24/2007 | GW | 077-09358 | DELTA 26-141 | PR | <input checked="" type="checkbox"/> |
| 291550 | WELL | PR | 07/24/2007 | GW | 077-09357 | DELTA 26-134 | PR | <input checked="" type="checkbox"/> |
| 291551 | WELL | PR | 07/24/2007 | GW | 077-09356 | DELTA 26-131 | PR | <input checked="" type="checkbox"/> |
| 291552 | WELL | PR | 07/24/2007 | GW | 077-09355 | DELTA 26-124 | PR | <input checked="" type="checkbox"/> |
| 291553 | WELL | PR | 07/24/2007 | GW | 077-09354 | DELTA 26-121 | 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

Lease Road:

| Type | Satisfactory/Action Required | comment | Corrective Action | Date |
|--------|------------------------------|---------|-------------------|------|
| Access | SATISFACTORY | | | |

Signs/Marker:

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

Emergency Contact Number (S/AV): SATISFACTORY Corrective Date: _____

Comment: **800-891-6191**

Corrective Action: _____

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 |
|----------|------------------------------|---------------|-------------------|---------|
| WELLHEAD | SATISFACTORY | Panels | | |

Equipment:

| Type | # | Satisfactory/Action Required | Comment | Corrective Action | CA Date |
|-----------------------------|---|------------------------------|---------|-------------------|---------|
| Horizontal Heated Separator | 9 | SATISFACTORY | | | |
| Bird Protectors | 7 | SATISFACTORY | | | |
| Emission Control Device | 1 | SATISFACTORY | | | |
| Gas Meter Run | 1 | SATISFACTORY | | | |
| Plunger Lift | 9 | SATISFACTORY | | | |

Facilities:

New Tank Tank ID: _____

| Contents | # | Capacity | Type | SE GPS |
|----------|---|----------|-----------|--------|
| METHANOL | 1 | <50 BBLS | STEEL AST | , |

S/AV: SATISFACTORY Comment: _____

Corrective Action: _____ Corrective Date: _____

Paint

| | |
|------------------|----------|
| Condition | Adequate |
| 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 |
| Comment | | | | |

Facilities: New Tank Tank ID: _____

| Contents | # | Capacity | Type | SE GPS |
|--------------------|--------------|----------|------------------|------------------|
| CONDENSATE | 2 | 400 BBLS | HEATED STEEL AST | , |
| S/A/V: | SATISFACTORY | | Comment: | |
| Corrective Action: | | | | Corrective Date: |

Paint

| | |
|------------------|----------|
| Condition | Adequate |
| Other (Content) | _____ |
| Other (Capacity) | _____ |
| Other (Type) | _____ |

Berms

| Type | Capacity | Permeability (Wall) | Permeability (Base) | Maintenance |
|-------------------|----------|---------------------|---------------------|-----------------|
| | | | | |
| Corrective Action | | | | Corrective Date |
| Comment | Same | | | |

Facilities: New Tank Tank ID: _____

| Contents | # | Capacity | Type | SE GPS |
|--------------------|--------------|----------|-----------|------------------|
| CONDENSATE | 2 | 400 BBLS | STEEL AST | , |
| S/A/V: | SATISFACTORY | | Comment: | |
| Corrective Action: | | | | Corrective Date: |

Paint

| | |
|------------------|----------|
| Condition | Adequate |
| 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 |
| Comment | | | | |

| | |
|-----------------|---------|
| Venting: | |
| Yes/No | Comment |
| NO | |

| | | | | |
|-----------------|------------------------------|---------|-------------------|---------|
| Flaring: | | | | |
| Type | Satisfactory/Action Required | Comment | Corrective Action | CA Date |
| | | | | |

Predrill

Location ID: 334487

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: 290618 Type: WELL API Number: 077-09287 Status: PR Insp. Status: PR

Producing Well

Comment: PR w/ plunger

Facility ID: 291546 Type: WELL API Number: 077-09361 Status: PR Insp. Status: PR

Producing Well

Comment: PR w/ plunger

Facility ID: 291547 Type: WELL API Number: 077-09360 Status: PR Insp. Status: PR

Producing Well

Comment: PR w/ plunger

Facility ID: 291548 Type: WELL API Number: 077-09359 Status: PR Insp. Status: PR

Producing Well

Comment: PR w/ plunger

Facility ID: 291549 Type: WELL API Number: 077-09358 Status: PR Insp. Status: PR

Producing Well

Comment: PR w/ plunger

Facility ID: 291550 Type: WELL API Number: 077-09357 Status: PR Insp. Status: PR

Producing Well

Comment: PR w/ plunger

Facility ID: 291551 Type: WELL API Number: 077-09356 Status: PR Insp. Status: PR

Producing Well

Comment: PR w/ plunger

Facility ID: 291552 Type: WELL API Number: 077-09355 Status: PR Insp. Status: PR

Producing Well

Comment: PR w/ plunger

Facility ID: 291553 Type: WELL API Number: 077-09354 Status: PR Insp. Status: PR

Producing Well

Comment: PR w/ plunger

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: _____

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: _____

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 |
|------------------|-----------------|-------------------------|-----------------------|---------------|--------------------------|---------|
| Compaction | Pass | Gravel | Pass | | | |
| Berms | Pass | Compaction | Pass | | | |
| Gravel | Pass | | | | | |
| Ditches | Pass | Check Dams | Pass | | | |
| Seeding | Pass | | | | | |

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

Comment:

CA:

Pits: NO SURFACE INDICATION OF PIT