

**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:

04/21/2015

Document Number:

666800895

Overall Inspection:

SATISFACTORY**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	422408	335543	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
Knudson, Dwayne	970-372-5706	dknudson@ursaresources.com	

Compliance Summary:QtrQtr: SWSW Sec: 16 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)
05/31/2013	670200525			SATISFACTORY			No

Inspector Comment:**Related Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status	
292194	WELL	PR	01/17/2012	GW	045-14634	LEFT HAND FED CA A4	PR	<input checked="" type="checkbox"/>
292195	WELL	AL	07/14/2011	LO	045-14633	LEFT HAND FED CA A7	AL	<input checked="" type="checkbox"/>
292196	WELL	XX	03/11/2011	LO	045-14632	LEFT HAND FED CA A5	XX	<input checked="" type="checkbox"/>
292197	WELL	AL	07/14/2011	LO	045-14631	LEFT HAND FED CA A8	AL	<input checked="" type="checkbox"/>
422405	WELL	PR	10/03/2011	GW	045-20571	LEFT HAND FED CA A9	PR	<input checked="" type="checkbox"/>
422408	WELL	PR	11/15/2011	GW	045-20572	LEFT HAND FED CA A3	PR	<input checked="" type="checkbox"/>
422425	WELL	PR	08/21/2011	GW	045-20577	LEFT HAND FED CA A10	PR	<input checked="" type="checkbox"/>
422456	WELL	PR	10/06/2011	GW	045-20581	LEFT HAND FED CA A2	PR	<input checked="" type="checkbox"/>
422521	WELL	XX	04/06/2011	LO	045-20588	LEFT HAND FED CA A11	XX	<input checked="" type="checkbox"/>
422529	WELL	XX	04/06/2011	LO	045-20592	LEFT HAND FED CA A1	XX	<input checked="" type="checkbox"/>

Inspector Name: Murray, Richard

422574	WELL	XX	04/06/2011	LO	045-20605	LEFT HAND FED CA A12	XX	<input checked="" type="checkbox"/>
422680	WELL	XX	04/17/2011	LO	045-20607	LEFT HAND FED CA A6	XX	<input checked="" type="checkbox"/>

Equipment:Location Inventory

Special Purpose Pits: _____	Drilling Pits: _____	Wells: 12	Production Pits: _____
Condensate Tanks: 2	Water Tanks: 4	Separators: 4	Electric Motors: _____
Gas or Diesel Motors: _____	Cavity Pumps: _____	LACT Unit: _____	Pump Jacks: _____
Electric Generators: _____	Gas Pipeline: 1	Oil Pipeline: 1	Water Pipeline: 1
Gas Compressors: _____	VOC Combustor: 1	Oil Tanks: _____	Dehydrator Units: _____
Multi-Well Pits: _____	Pigging Station: 1	Flare: _____	Fuel Tanks: _____

Location**Signs/Marker:**

Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
BATTERY	SATISFACTORY	AIRS ID 045/2228/001		

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

Corrective Date: _____

Comment: _____

Corrective Action: _____

Spills:

Type	Area	Volume	Corrective action	CA Date
------	------	--------	-------------------	---------

☐ Multiple Spills and Releases?**Equipment:**

Type	#	Satisfactory/Action Required	Comment	Corrective Action	CA Date
Pig Station	1	SATISFACTORY			
Gas Meter Run	1	SATISFACTORY			
Horizontal Heated Separator	6	SATISFACTORY			
Plunger Lift	5	SATISFACTORY			
Emission Control Device	1	SATISFACTORY			

Venting:

Yes/No	Comment
NO	

Flaring:

Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date

Predrill

Location ID: 422408

Site Preparation:

Lease Road Adeq.: _____

Pads: _____

Soil Stockpile: _____

S/A/V: _____

Corrective Action: _____

Date: _____

CDP Num.: _____

Form 2A COAs:

Group	User	Comment	Date
OGLA	kubeczkod	<p>GENERAL SITE COAs:</p> <p>Operator must implement best management practices to contain any unintentional release of fluids, including any fluids conveyed via temporary surface pipelines or buried pipelines.</p> <p>Any pit constructed to hold fluids (reserve pit, production pit, frac pit; except for flare pit, if built) must be lined, or a closed loop system (as indicated by operator on the Form 2A) must be implemented .</p> <p>Operator must ensure secondary containment for any volume of fluids contained at well site during drilling and completion operations; including, but not limited to, construction of a berm or diversion dike, diversion/collection trenches within and/or outside of berms/dikes, site grading, or other comparable measures (i.e., best management practices (BMPs) associated with stormwater management) sufficiently protective of nearby surface water. Any berm constructed at the well pad location will be stabilized, inspected at regular intervals (at least every 14 days), and maintained in good condition.</p> <p>The moisture content of any drill cuttings in a cuttings pit, trench, or pile shall be as low as practicable to prevent accumulation of liquids greater than de minimis amounts. At the time of closure, the drill cuttings must also meet the applicable standards of table 910-1.</p> <p>Flowback and stimulation fluids must be sent to tanks to allow the sand to settle out before the fluids can be placed into any pipeline or pit located on the well pad. The flowback and stimulation fluid tanks must be placed on the well pad in an area with additional downgradient perimeter berming. The area where flowback fluids will be stored/reused must be constructed to be sufficiently impervious to contain any spilled or released material (per Rule 604.a.(4)).</p> <p>Berms or other containment devices shall be constructed in compliance with Rule 604.a.(4) around crude oil, condensate, and produced water storage tanks.</p>	03/28/2011

S/A/V: SATISFACTORY**Comment:**

No drilling or completions being performed at time of inspection. No visal sign of pits or cuttings

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: _____

Inspector Name: Murray, Richard

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: 292194 Type: WELL API Number: 045-14634 Status: PR Insp. Status: PR

Producing Well

Comment: Plunger lift

Facility ID: 292195 Type: WELL API Number: 045-14633 Status: AL Insp. Status: AL

Workover

Comment: No visal sign of well

Facility ID: 292196 Type: WELL API Number: 045-14632 Status: XX Insp. Status: XX

Facility ID: 292197 Type: WELL API Number: 045-14631 Status: AL Insp. Status: AL

Workover

Comment: No visal sign of well

Facility ID: 422405 Type: WELL API Number: 045-20571 Status: PR Insp. Status: PR

Producing Well

Comment: Plunger lift

Facility ID: 422408 Type: WELL API Number: 045-20572 Status: PR Insp. Status: PR

Producing Well

Comment: Plunger lift

Facility ID: 422425 Type: WELL API Number: 045-20577 Status: PR Insp. Status: PR

Producing Well

Comment: Plunger lift

Facility ID: 422456 Type: WELL API Number: 045-20581 Status: PR Insp. Status: PR

Producing Well

Comment: Plunger lift

Facility ID: 422521 Type: WELL API Number: 045-20588 Status: XX Insp. Status: XX

Facility ID: 422529 Type: WELL API Number: 045-20592 Status: XX Insp. Status: XX

Facility ID: 422574 Type: WELL API Number: 045-20605 Status: XX Insp. Status: XX

Inspector Name: Murray, Richard

Facility ID: 422680 Type: WELL API Number: 045-20607 Status: XX Insp. Status: XX

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): 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: 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? Pass

1003d. Drilling pit closed? Pass Subsidence over on drill pit? _____

Cuttings management: _____

Inspector Name: Murray, Richard

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					
		Ditches	Pass			
		Check Dams	Pass			
		Gravel	Pass			
		Waddles	Pass			
Berms	Pass					
Blankets	Pass					
Seeding	Pass					
		Culverts	Pass			
Slope Roughening	Pass					

Inspector Name: Murray, Richard

S/A/V: SATISFACTOR
Y

Corrective Date: _____

Comment:

CA:

Pits: ☒ NO SURFACE INDICATION OF PIT