

**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:

05/05/2015

Document Number:

673900977

Overall Inspection:

SATISFACTORY**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	429978	429977	Rains, Bill	<input type="checkbox"/>	

**Operator Information:**

OGCC Operator Number: 8960

Name of Operator: BONANZA CREEK ENERGY OPERATING COMPANY

Address: 410 17TH STREET SUITE #1400

City: DENVER State: CO Zip: 80202

- ☐ 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
Jones,		EHSRC@bonanzacrk.com	All Inspections

**Compliance Summary:**

QtrQtr: NWNW Sec: 15 Twp: 5N Range: 62W

**Inspector Comment:****Related Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status	
429978	WELL	PR	06/04/2013	OW	123-35985	ANTELOPE F-J-15HNB	PR	<input checked="" type="checkbox"/>
437296	SPILL OR RELEASE	CL	05/21/2014		-	SPILL/RELEASE POINT	CL	<input type="checkbox"/>
438126	WELL	PR	04/02/2015		123-39886	Antelope A-E-15HNB	PR	<input checked="" type="checkbox"/>
438127	WELL	PR	04/02/2015		123-39887	Antelope A11-E14-15HNB	PR	<input checked="" type="checkbox"/>
438128	WELL	PR	04/02/2015		123-39888	Antelope 11-14-15HNB	PR	<input checked="" type="checkbox"/>
438129	WELL	PR	04/02/2015		123-39889	Antelope A11-E14-15HNC	PR	<input checked="" type="checkbox"/>
438130	WELL	PR	04/02/2015	OW	123-39890	Antelope A-E-15HNC	PR	<input checked="" type="checkbox"/>

**Equipment:****Location Inventory**

Special Purpose Pits: <u>        </u>	Drilling Pits: <u>        </u>	Wells: <u>13</u>	Production Pits: <u>        </u>
Condensate Tanks: <u>28</u>	Water Tanks: <u>14</u>	Separators: <u>13</u>	Electric Motors: <u>13</u>
Gas or Diesel Mortors: <u>13</u>	Cavity Pumps: <u>        </u>	LACT Unit: <u>2</u>	Pump Jacks: <u>13</u>
Electric Generators: <u>7</u>	Gas Pipeline: <u>1</u>	Oil Pipeline: <u>        </u>	Water Pipeline: <u>        </u>
Gas Compressors: <u>12</u>	VOC Combustor: <u>10</u>	Oil Tanks: <u>32</u>	Dehydrator Units: <u>2</u>
Multi-Well Pits: <u>        </u>	Pigging Station: <u>1</u>	Flare: <u>1</u>	Fuel Tanks: <u>        </u>

**Location**

Inspector Name: Rains, Bill

<b>Signs/Marker:</b>				
Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
TANK LABELS/PLACARDS	SATISFACTORY			
CONTAINERS	SATISFACTORY			
WELLHEAD	SATISFACTORY			
BATTERY	SATISFACTORY			

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

Corrective Date: \_\_\_\_\_

Comment: \_\_\_\_\_

Corrective Action: \_\_\_\_\_

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

<b>Fencing/:</b>				
Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
LOCATION	SATISFACTORY	WIRE		
WELLHEAD	SATISFACTORY	PIPE		

<b>Equipment:</b>					
Type	#	Satisfactory/Action Required	Comment	Corrective Action	CA Date
Bird Protectors	20	SATISFACTORY	22		
Plunger Lift	6	SATISFACTORY			
Other	1	SATISFACTORY	GAS LIFT SKID		
Vertical Separator	8	SATISFACTORY	6 SAND TRAPS 2 VRTs		
Compressor	4	SATISFACTORY			
Gas Meter Run	18	SATISFACTORY			
Emission Control Device	12	SATISFACTORY			
VRU	4	SATISFACTORY			
Ancillary equipment	19	SATISFACTORY	SOLAR PANELS, OIL AND CHEM TANKS		
Horizontal Heated Separator	10	SATISFACTORY			
Other	2	SATISFACTORY	GLYCOL HEATER		

**Facilities:** ☐ New Tank Tank ID: \_\_\_\_\_

Contents	#	Capacity	Type	SE GPS
			CENTRALIZED BATTERY	,
S/A/V:		Comment:		
Corrective Action:				Corrective Date:

Paint

Inspector Name: Rains, Bill

Condition					
Other (Content)					
Other (Capacity)					
Other (Type)					
<u>Berms</u>					
Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance	
Corrective Action				Corrective Date	
Comment					

**Facilities:** ☐ New Tank Tank ID: \_\_\_\_\_

Contents	#	Capacity	Type	SE GPS	
			CENTRALIZED PAD	,	
S/A/V:			Comment:		
Corrective Action:				Corrective Date:	

Paint

Condition					
Other (Content)					
Other (Capacity)					
Other (Type)					
<u>Berms</u>					
Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance	
Corrective Action				Corrective Date	
Comment					

**Facilities:** ☐ New Tank Tank ID: \_\_\_\_\_

Contents	#	Capacity	Type	SE GPS	
OTHER	1	500 BBLS		,	
S/A/V:			Comment:	MOBLE 500BBL FAC TANK WITH LINED CONTAINMENT	
Corrective Action:				Corrective Date:	

Paint

Condition					
Other (Content)					
Other (Capacity)					
Other (Type)					
<u>Berms</u>					
Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance	
Corrective Action				Corrective Date	
Comment					

**Facilities:** ☐ New Tank Tank ID: \_\_\_\_\_

Contents	#	Capacity	Type	SE GPS
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Inspector Name: Rains, Bill

OTHER	1	<100 BBLS	BV CONCRETE	40.405720,-104.314930
S/A/V:	SATISFACTORY		Comment:	
Corrective Action:				Corrective Date:
<u>Paint</u>				
Condition				
Other (Content) _____				
Other (Capacity) _____				
Other (Type) _____				
<u>Berms</u>				
Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Metal	Adequate	Walls Sufficient	Base Sufficient	Adequate
Corrective Action				Corrective Date
Comment				
<b>Facilities:</b> <input type="checkbox"/> New Tank Tank ID: _____				
Contents	#	Capacity	Type	SE GPS
PRODUCED WATER	2	<100 BBLS	BV CONCRETE	,
S/A/V:	SATISFACTORY		Comment:	
Corrective Action:				Corrective Date:
<u>Paint</u>				
Condition	Adequate			
Other (Content) _____				
Other (Capacity) _____				
Other (Type) _____				
<u>Berms</u>				
Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Corrective Action				Corrective Date
Comment				
<b>Facilities:</b> <input type="checkbox"/> New Tank Tank ID: _____				
Contents	#	Capacity	Type	SE GPS
PRODUCED WATER	2	500 BBLS	STEEL AST	,
S/A/V:	SATISFACTORY		Comment:	
Corrective Action:				Corrective Date:
<u>Paint</u>				
Condition	Adequate			
Other (Content) _____				
Other (Capacity) _____				
Other (Type) _____				
<u>Berms</u>				
Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance

Inspector Name: Rains, Bill

Corrective Action		Corrective Date	
Comment			

**Facilities:** ☐ New Tank Tank ID: \_\_\_\_\_

Contents	#	Capacity	Type	SE GPS
PRODUCED WATER	2	<100 BBLS	BV CONCRETE	,
S/A/V:	SATISFACTORY		Comment:	
Corrective Action:				Corrective Date:

Paint

Condition	
Other (Content)	
Other (Capacity)	
Other (Type)	

Berms

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

**Facilities:** ☐ New Tank Tank ID: \_\_\_\_\_

Contents	#	Capacity	Type	SE GPS
PRODUCED WATER	2	500 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				

**Facilities:** ☐ New Tank Tank ID: \_\_\_\_\_

Contents	#	Capacity	Type	SE GPS
CRUDE OIL	11	500 BBLS	STEEL AST	40.406120,-104.313770
S/A/V:	SATISFACTORY		Comment: EAST TANK BATTERY	
Corrective Action:				Corrective Date:

Paint

Condition	Adequate
Other (Content)	
Other (Capacity)	

Inspector Name: Rains, Bill

Other (Type) _____				
<b>Berms</b>				
Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Metal	Adequate	Walls Sufficent	Base Sufficent	Adequate
Corrective Action				Corrective Date
Comment				
<b>Facilities:</b> <input type="checkbox"/> New Tank Tank ID: _____				
Contents	#	Capacity	Type	SE GPS
CRUDE OIL	11	500 BBLS	STEEL AST	40.406240,-104.315950
S/A/V:	SATISFACTORY		Comment: WEST TANK BATTERY	
Corrective Action:				Corrective Date:
<b>Paint</b>				
Condition	Adequate			
Other (Content) _____				
Other (Capacity) _____				
Other (Type) _____				
<b>Berms</b>				
Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Metal	Adequate	Walls Sufficent	Base Sufficent	Adequate
Corrective Action				Corrective Date
Comment				
<b>Venting:</b>				
Yes/No	Comment			
NO				
<b>Flaring:</b>				
Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
<b>Predrill</b>				
Location ID: 429978				
<b>Site Preparation:</b>				
Lease Road Adeq.: _____		Pads: _____	Soil Stockpile: _____	
S/A/V: _____				
Corrective Action: _____		Date: _____	CDP Num.: _____	
<b>Form 2A COAs:</b>				
Group	User	Comment	Date	
Agency	HouseyM	The proposed location is in a sensitive area with with a number of monitoring wells within proximity to the proposed location. Secondary containment areas for tanks shall be constructed of steel rings, designed and installed to prevent leakage and resist degradation from erosion or routine operation and shall be constructed with a synthetic or engineered liner that contains all primary containment vessels and flowlines and is mechanically connected to the steel ring to prevent leakage.	07/10/2014	
S/A/V: _____		Comment: _____		
CA: _____			Date: _____	

**Wildlife BMPs:**

BMP Type	Comment
Construction	<p>The following procedure describes BCEI standard construction practices for setting a partially buried pre-cast cement water vault and new tank battery construction.</p> <p>1) The excavation will first be lined with 4" of clay or other low permeability soil.</p> <p>2) A 30 mil liner will be installed on top of the low permeability soil. The 30 mil liner will be a contiguous liner which will underlay the entire tank battery.</p> <p>3) The tank battery / water vault liner will be keyed into a galvanized steel containment ring installed surrounding the tank battery.</p> <p>4) Sand bedding will be installed to protect the synthetic liner prior to placing equipment in the containment area.</p>

S/AV: \_\_\_\_\_ **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: 429978 Type: WELL API Number: 123-35985 Status: PR Insp. Status: PR

**Producing Well**

Comment: PR

**BradenHead**

Comment: BRADENHEAD EXPOSED TO SURFACE

CA: \_\_\_\_\_

CA Date: \_\_\_\_\_

Facility ID: 438126 Type: WELL API Number: 123-39886 Status: PR Insp. Status: PR

**Producing Well**

Comment: PR

**BradenHead**Comment: **BRADENHEAD EXPOSED TO SURFACE**CA: CA Date: Facility ID: 438127 Type: WELL API Number: 123-39887 Status: PR Insp. Status: PR**Producing Well**Comment: **PR****BradenHead**Comment: **BRADENHEAD EXPOSED TO SURFACE**CA: CA Date: Facility ID: 438128 Type: WELL API Number: 123-39888 Status: PR Insp. Status: PR**Producing Well**Comment: **PR****BradenHead**Comment: **BRADENHEAD EXPOSED TO SURFACE**CA: CA Date: Facility ID: 438129 Type: WELL API Number: 123-39889 Status: PR Insp. Status: PR**Producing Well**Comment: **PR****BradenHead**Comment: **BRADENHEAD EXPOSED TO SURFACE**CA: CA Date: Facility ID: 438130 Type: WELL API Number: 123-39890 Status: PR Insp. Status: PR**Producing Well**Comment: **PR****BradenHead**Comment: **BRADENHEAD EXPOSED 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:



Inspector Name: Rains, Bill

**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: RANGELAND

Comment: \_\_\_\_\_

1003a. Debris removed? Pass CM \_\_\_\_\_  
CA \_\_\_\_\_ CA Date \_\_\_\_\_  
Waste Material Onsite? Pass CM \_\_\_\_\_  
CA \_\_\_\_\_ CA Date \_\_\_\_\_  
Unused or unneeded equipment onsite? In CM \_\_\_\_\_  
CA \_\_\_\_\_ CA Date \_\_\_\_\_  
Pit, cellars, rat holes and other bores closed? Pass CM \_\_\_\_\_  
CA \_\_\_\_\_ CA Date \_\_\_\_\_  
Guy line anchors removed? Pass CM \_\_\_\_\_  
CA \_\_\_\_\_ CA Date \_\_\_\_\_  
Guy line anchors marked? \_\_\_\_\_ CM \_\_\_\_\_  
CA \_\_\_\_\_ CA Date \_\_\_\_\_

1003b. Area no longer in use? In \_\_\_\_\_ Production areas stabilized ? In \_\_\_\_\_

1003c. Compacted areas have been cross ripped? \_\_\_\_\_

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 \_\_\_\_\_

Inspector Name: Rains, Bill

**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
Waddles	Pass					
Gravel	Pass	Gravel	Pass	MHSP	Pass	

S/A/V: SATISFACTOR  
Y

Corrective Date: \_\_\_\_\_

Comment: \_\_\_\_\_

CA: \_\_\_\_\_

**Pits:** ☒ NO SURFACE INDICATION OF PIT