

**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:
05/28/2015Document Number:
668603504

Overall Inspection:

ACTION REQUIRED**FIELD INSPECTION FORM**

| | | | | | |
|---------------------|-------------|--------|-----------------|--------------------------|-------------|
| Location Identifier | Facility ID | Loc ID | Inspector Name: | On-Site Inspection | 2A Doc Num: |
| | 207310 | 321566 | QUINT, CRAIG | <input type="checkbox"/> | |

Operator Information:OGCC Operator Number: 61650Name of Operator: MURFIN DRILLING COMPANY INCAddress: 250 N WATER ST STE 300City: WICHITA State: KS Zip: 67202

- ☐ 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 |
|-----------------|-------------------|----------------|---------|
| Esquivel, James | 620-272-4913 cell | 280189@pld.com | |

Compliance Summary:QtrQtr: SENW Sec: 12 Twp: 16S Range: 45W

| Insp. Date | Doc Num | Insp. Type | Insp Status | Satisfactory /Action Required | PA P/F/I | Pas/Fail (P/F) | Violation (Y/N) |
|------------|-----------|------------|-------------|-------------------------------|----------|----------------|-----------------|
| 04/28/2014 | 668602563 | IJ | AC | SATISFACTORY | P | | No |
| 06/12/2013 | 668600917 | IJ | AC | SATISFACTORY | | | No |
| 05/06/2011 | 200310041 | RT | AC | SATISFACTORY | | | No |
| 08/02/2010 | 200265295 | RT | AC | SATISFACTORY | | | No |
| 04/19/2010 | 200243569 | RT | AC | ACTION REQUIRED | | | Yes |
| 05/19/2009 | 200210940 | RT | AC | ACTION REQUIRED | | | Yes |
| 06/16/2008 | 200191048 | MI | AC | SATISFACTORY | | | No |
| 04/27/2007 | 200109739 | RT | AC | SATISFACTORY | | Pass | No |
| 07/20/2006 | 200094585 | RT | AC | SATISFACTORY | | Pass | No |
| 07/26/2005 | 200074870 | RT | AC | SATISFACTORY | | Pass | No |
| 07/29/2004 | 200058108 | RT | AC | SATISFACTORY | | Pass | No |
| 08/20/2003 | 200043280 | MI | AC | SATISFACTORY | | Pass | No |
| 07/31/2002 | 200029497 | RT | AC | SATISFACTORY | | Pass | No |
| 08/21/2001 | 200019500 | RT | AC | SATISFACTORY | | Pass | No |
| 08/31/2000 | 200009315 | RT | AC | SATISFACTORY | I | Pass | No |
| 01/25/1999 | 500138367 | PR | AC | | | Pass | No |
| 06/11/1997 | 500138366 | PR | AC | | | Pass | No |
| 01/17/1996 | 500138365 | PR | AC | | | Pass | Yes |
| 12/28/1994 | 500138364 | PR | AC | | | Fail | |

Inspector Comment:

Related Facilities:

| Facility ID | Type | Status | Status Date | Well Class | API Num | Facility Name | Insp Status | |
|-------------|--------------|--------|-------------|------------|-----------|---------------|-------------|-------------------------------------|
| 113104 | PIT | AC | 09/23/1999 | | - | LOWE 7-12 SWD | AC | <input type="checkbox"/> |
| 150193 | UIC DISPOSAL | AC | 03/07/1988 | | - | LOWE 7-12 | AC | <input checked="" type="checkbox"/> |
| 207310 | WELL | IJ | 11/10/1987 | DSPW | 017-06245 | LOWE 7-12 | AC | <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 Motors: _____ 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 | DIRT ROAD THOUGH PASTURE | | |

Signs/Marker:

| Type | Satisfactory/Action Required | Comment | Corrective Action | CA Date |
|----------------------|------------------------------|------------------------------|-------------------|---------|
| WELLHEAD | SATISFACTORY | LEASE SIGN MOUNTED ON FENCE | | |
| BATTERY | SATISFACTORY | LEASE SIGN MOUNTED ON STAIRS | | |
| TANK LABELS/PLACARDS | SATISFACTORY | STICKERS | | |

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

Corrective Date: _____

Comment: _____

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 | STEEL PANELS AROUND WELLHEAD | | |
| TANK BATTERY | SATISFACTORY | BATTERY FENCED WITH WIRE | | |

Facilities:☐ New Tank

Tank ID: _____

Inspector Name: QUINT, CRAIG

| | | | | |
|--------------------|--------------|----------|----------------|-----------------------|
| Contents | # | Capacity | Type | SE GPS |
| PRODUCED WATER | 1 | 400 BBLS | FIBERGLASS AST | 38.681850,-102.413310 |
| 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 |
| Earth | Inadequate | Walls Sufficient | Base Sufficient | Inadequate |
| Corrective Action | REPAIR BERM TO CONTAIN 400BBL PLUS PRECIPITATION. | | | Corrective Date 06/28/2015 |
| Comment | STORM WATER HAS ERODED A CHANNEL IN THE NW CORNER OF THE BERM | | | |

Facilities: ☐ New Tank Tank ID: _____

| | | | | |
|--------------------|--------------|----------|---|-----------------------|
| Contents | # | Capacity | Type | SE GPS |
| PRODUCED WATER | 1 | 500 BBLS | FIBERGLASS AST | 38.681850,-102.413310 |
| S/A/V: | SATISFACTORY | | Comment: SHARED BERM (TANK IS NOT IN USE) | |
| 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 | | | | |

Venting:

| | |
|--------|---------|
| Yes/No | Comment |
| | |

Flaring:

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

Predrill

Location ID: 207310

Site Preparation:

Lease Road Adeq.: _____ Pads: _____ Soil Stockpile: _____

S/A/V: _____

Corrective Action: _____ Date: _____ CDP Num.: _____

Form 2A COAs:**S/A/V:** SATISFACTORY **Comment:** NO ISSUES OBSERVED**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: 150193 Type: UIC API Number: - Status: AC Insp. Status: AC

Facility ID: 207310 Type: WELL API Number: 017-06245 Status: IJ Insp. Status: AC

Underground Injection Control

UIC Violation: _____

Maximum Injection Pressure: _____

UIC RoutineInj./Tube: Pressure or inches of Hg -22" HG
(e.g. 30 psig or -30" Hg)

Previous Test Pressure _____

MPP _____

Inj Zone: ABCKTC: Pressure or inches of Hg 0 PSIG

Previous Test Pressure _____

Last MIT: 06/12/2013

Brhd: Pressure or inches of Hg _____

Previous Test Pressure _____

AnnMTReq: NOComment: CASING HAD A STRONG BLOW THAT DIED IMMEDIATELY, TBG IJ @ 22" VACUUMMethod of Injection: GRAVITY FEED

Test Type: _____

Tbg psi: _____

Csg psi: _____

BH psi: _____

Insp. Status: _____

Comment: _____

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? 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? _____ 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 REVEGETATIONCropland

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 | Compaction | Pass | | | |

Inspector Name: QUINT, CRAIG

S/A/V: SATISFACTOR
Y

Corrective Date: _____

Comment:

CA:

Pits: ☒ NO SURFACE INDICATION OF PIT

Attached Documents

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

| Document Num | Description | URL |
|--------------|-------------|---|
| 668603505 | BERM BREACH | http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3615649 |

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.)