

**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:
06/03/2015Document Number:
670901043

Overall Inspection:

ACTION REQUIRED**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	203505	321512	Peterson, Tom	<input type="checkbox"/>	

Operator Information:OGCC Operator Number: 10459Name of Operator: EXTRACTION OIL & GAS LLCAddress: 1888 SHERMAN ST #200City: DENVER State: CO Zip: 80203

- ☒ 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
		COGCCInspections@extracti onog.com	All inspections

Compliance Summary:QtrQtr: SESE Sec: 18 Twp: 1S Range: 68W

Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Action Required	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
10/29/2014	668302953	PR	SI	ACTION REQUIRED	I		No
04/24/2014	668301291	PR	SI	ACTION REQUIRED	P		No
12/11/2013	600000396	PR	SI	SATISFACTORY	P		No
12/10/2005	200081811	PR	PR	SATISFACTORY		Pass	No
09/26/1997	500133223	PR	PR			Pass	No

Inspector Comment:**Related Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status	
203505	WELL	PR	12/20/1996	GW	014-09065	HELLERSTEIN 2-18	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
Main	ACTION REQUIRED	Lease road has been damaged and is in need of maintenance.	Repair lease road.	07/17/2015

Signs/Marker:				
Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
BATTERY	ACTION REQUIRED	Incorrect operator information on sign.	Install sign to comply with rule 210.	07/17/2015
OTHER	ACTION REQUIRED	Lease road entrance. Incorrect operator information on sign.	Install sign to comply with rule 210.	07/17/2015
WELLHEAD	ACTION REQUIRED	Incorrect operator information on sign.	Install sign to comply with rule 210.	07/17/2015
TANK LABELS/PLACARDS	ACTION REQUIRED	No placarding exists on chemical container next to separator. See attached photo.	Install sign to comply with rule 210.	07/17/2015

Emergency Contact Number (S/A/V): ACTION Corrective Date: 07/17/2015Comment: Incorrect emergency contact information on sign.Corrective Action: Add correct emergency contact information to all signs.

Good Housekeeping:				
Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
WEEDS	ACTION REQUIRED	Weeds are around separator, wellhead and tank areas. See attached photos.	Control weeds.	07/17/2015
STORAGE OF SUPL	ACTION REQUIRED	Empty chemical containers floating in catch basin below chemical container. See attached photo.	Remove trash.	07/17/2015

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
TANK BATTERY	SATISFACTORY	Barbed wire topped chain link		
WELLHEAD	SATISFACTORY	Wood privacy fencing.		
SEPARATOR	SATISFACTORY	Barbed wire topped chain link		

Facilities:				
<input type="checkbox"/> New Tank		Tank ID: _____		
Contents	#	Capacity	Type	SE GPS

Inspector Name: Peterson, Tom

PRODUCED WATER		<50 BBLS	OTHER		
S/A/V:	SATISFACTORY	Comment: 48 bbls concrete AST			
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					
<u>Facilities:</u> <input type="checkbox"/> New Tank Tank ID: _____					
Contents	#	Capacity	Type	SE GPS	
CRUDE OIL		OTHER	STEEL AST		
S/A/V:	SATISFACTORY	Comment: 160 bbls			
Corrective Action:					Corrective Date:
<u>Paint</u>					
Condition					
Other (Content)					
Other (Capacity)					
Other (Type)					
<u>Berms</u>					
Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance	
Other	Adequate	Walls Sufficient	Base Sufficient	Adequate	
Corrective Action					Corrective Date
Comment	Wood and earthen cellar.				
<u>Facilities:</u> <input type="checkbox"/> New Tank Tank ID: _____					
Contents	#	Capacity	Type	SE GPS	
OTHER	0				
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	

Inspector Name: Peterson, Tom

Corrective Action		Corrective Date	
Comment			

Venting:	
Yes/No	Comment
NO	

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

Predrill

Location ID: 203505

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: 203505 Type: WELL API Number: 014-09065 Status: PR Insp. Status: PR

Inspector Name: Peterson, Tom

Producing Well

Comment: **PR**

BradenHead

Comment: **Bradenhead is exposed at 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:

DWR Receipt Num: _____ Owner Name: _____ GPS : _____ Lat _____ Long _____

Field Parameters:

Sample Location: _____

Emission Control Burner (ECB): **N**

Comment: _____

Pilot: _____ Wildlife Protection Devices (fired vessels): **YES**

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? **Pass** CM _____

CA _____ CA Date _____

Guy line anchors marked? _____ CM _____

CA _____ CA Date _____

Inspector Name: Peterson, Tom

- 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
Gravel	Pass	Gravel	Fail			

S/A/V: **ACTION REQUIRED** Corrective Date: **07/17/2015**

Comment: **Lease road needs repair.**

CA: **Maintnain lease road.**

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
670901044	Weeds	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3618880
670901045	Chemical container	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3618881
670901046	Trash	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3618882
670901047	Battery sign and weeds	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3618883
670901048	Weeds	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3618884

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.)