

**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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Inspection Date:

06/19/2015

Document Number:

666801085

Overall Inspection:

SATISFACTORY**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	412895	414092	Murray, Richard	<input type="checkbox"/>	

Operator Information:OGCC Operator Number: 10531Name of Operator: VANGUARD OPERATING LLCAddress: 5847 SAN FELIPE #3000City: HOUSTON State: TX Zip: 77057

- ☒ 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
Axelson, Aaron	970-230-0926	aaxelson@vnrlc.com	Sr. Production Foreman
Ghan, Scott		sghan@vnrlc.com	Sr. EH&S

Compliance Summary:QtrQtr: SWNW Sec: 36 Twp: 6S Range: 92W**Inspector Comment:***Action required items noted in previous inspection have been satisfied***Related Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status	
412889	WELL	PR		GW	045-18680	MILLER 23D-36-692	PR	<input checked="" type="checkbox"/>
412890	WELL	PR		GW	045-18681	MILLER 22A-36-692	PR	<input checked="" type="checkbox"/>
412891	WELL	PR		GW	045-18682	MILLER 23C-36-692	PR	<input checked="" type="checkbox"/>
412892	WELL	PR		GW	045-18683	MILLER 13D-36-692	PR	<input checked="" type="checkbox"/>
412893	WELL	PR		GW	045-18684	MILLER 13C-36-692	PR	<input checked="" type="checkbox"/>
412894	WELL	PR		GW	045-18685	MILLER 12D-36-692	PR	<input checked="" type="checkbox"/>
412895	WELL	PR	05/12/2010	GW	045-18686	MILLER 12C-36-692	PR	<input checked="" type="checkbox"/>
412896	WELL	PR		GW	045-18687	MILLER 11A-36-692	PR	<input checked="" type="checkbox"/>
412897	WELL	PR		GW	045-18688	MILLER 11B-36-692	PR	<input checked="" type="checkbox"/>
412898	WELL	PR		GW	045-18689	MILLER 11D-36-692	PR	<input checked="" type="checkbox"/>
412899	WELL	PR		GW	045-18690	MILLER 12A-36-692	PR	<input checked="" type="checkbox"/>

Equipment:Location Inventory

Inspector Name: Murray, Richard

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

Signs/Marker:

Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
WELLHEAD	SATISFACTORY			
CONTAINERS	SATISFACTORY			

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

Corrective Date: _____

Comment: _____

Corrective Action: _____

Spills:

Type	Area	Volume	Corrective action	CA Date
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☐ Multiple Spills and Releases?

Equipment:

Type	#	Satisfactory/Action Required	Comment	Corrective Action	CA Date
Ancillary equipment	2	SATISFACTORY	Chemical unit at wellhead		
Horizontal Heated Separator	13	SATISFACTORY			
Plunger Lift	11	SATISFACTORY			

Venting:

Yes/No	Comment
NO	

Flaring:

Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date

Predrill

Location ID: 412895

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: 412889 Type: WELL API Number: 045-18680 Status: PR Insp. Status: PR

Producing Well

Comment: Plunger lift

Facility ID: 412890 Type: WELL API Number: 045-18681 Status: PR Insp. Status: PR

Producing Well

Comment: Plunger lift

Facility ID: 412891 Type: WELL API Number: 045-18682 Status: PR Insp. Status: PR

Producing Well

Comment: Plunger lift

Facility ID: <u>412892</u>	Type: <u>WELL</u>	API Number: <u>045-18683</u>	Status: <u>PR</u>	Insp. Status: <u>PR</u>
<u>Producing Well</u>				
Comment: <u>Plunger lift</u>				

Facility ID: <u>412893</u>	Type: <u>WELL</u>	API Number: <u>045-18684</u>	Status: <u>PR</u>	Insp. Status: <u>PR</u>
<u>Producing Well</u>				
Comment: <u>Plunger lift</u>				

Facility ID: <u>412894</u>	Type: <u>WELL</u>	API Number: <u>045-18685</u>	Status: <u>PR</u>	Insp. Status: <u>PR</u>
<u>Producing Well</u>				
Comment: <u>Plunger lift</u>				

Facility ID: <u>412895</u>	Type: <u>WELL</u>	API Number: <u>045-18686</u>	Status: <u>PR</u>	Insp. Status: <u>PR</u>
<u>Producing Well</u>				
Comment: <u>Plunger lift</u>				

Facility ID: <u>412896</u>	Type: <u>WELL</u>	API Number: <u>045-18687</u>	Status: <u>PR</u>	Insp. Status: <u>PR</u>
<u>Producing Well</u>				
Comment: <u>Plunger lift</u>				

Facility ID: <u>412897</u>	Type: <u>WELL</u>	API Number: <u>045-18688</u>	Status: <u>PR</u>	Insp. Status: <u>PR</u>
<u>Producing Well</u>				
Comment: <u>Plunger lift</u>				

Facility ID: <u>412898</u>	Type: <u>WELL</u>	API Number: <u>045-18689</u>	Status: <u>PR</u>	Insp. Status: <u>PR</u>
<u>Producing Well</u>				
Comment: <u>Plunger lift</u>				

Facility ID: <u>412899</u>	Type: <u>WELL</u>	API Number: <u>045-18690</u>	Status: <u>PR</u>	Insp. Status: <u>PR</u>
<u>Producing Well</u>				
Comment: <u>Plunger lift</u>				

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:

Lat _____ Long _____

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

Field Parameters:

Inspector Name: Murray, Richard

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? In CM Land farm

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 _____

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: _____

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: _____

Inspector Name: Murray, Richard

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
		Ditches	Pass			
		Sediment Traps	Pass			
Berms	Pass					
Seeding	Pass					
		Gravel	Pass			
Slope Roughening	Pass					
Ditches	Pass					
		Check Dams	Pass			
		Culverts	Pass			
Sediment Traps	Pass					

S/A/V: SATISFACTOR
Y

Corrective Date:

Comment:

CA:

Pits: ☒ NO SURFACE INDICATION OF PIT