

**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
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Inspection Date:

06/23/2015

Document Number:

666801086

Overall Inspection:

SATISFACTORY**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	211517	334881	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
Ghan, Scott		sghan@vnrlc.com	Sr. EH&S
Axelsson, Aaron	970-230-0926	aaxelsson@vnrlc.com	Sr. Production Foreman

Compliance Summary:QtrQtr: SENV Sec: 31 Twp: 6S Range: 91W

Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Action Required	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
01/29/2014	670201206	PR	PR	SATISFACTORY			No
03/13/2009	200205685	PR	PR	SATISFACTORY			No
12/30/2008	200201579	PR	PR	SATISFACTORY			No
08/08/2001	200022356	PR	PR	SATISFACTORY		Pass	No
04/15/1999	500143136	SR	AL		P		

Inspector Comment:**Related Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status	
211493	WELL	AL	10/26/2000	LO	045-07253	GIBSON GULCH UNIT 7 -31	AL	<input checked="" type="checkbox"/>
211517	WELL	PR	07/16/2009	GW	045-07277	GIBSON GULCH UNIT 6 -31	SI	<input checked="" type="checkbox"/>
211518	WELL	PR	12/27/2007	GW	045-07278	GIBSON GULCH UNIT 5 -31	SI	<input checked="" type="checkbox"/>
211519	WELL	PR	07/16/2009	GW	045-07279	GIBSON GULCH UNIT 6 -31 C	PR	<input checked="" type="checkbox"/>
260610	WELL	PR	07/16/2009	GW	045-07878	GIBSON GULCH UNIT 6 -31D	SI	<input checked="" type="checkbox"/>
260611	WELL	PR	07/16/2009	GW	045-07879	GIBSON GULCH UNIT 11-31	SI	<input checked="" type="checkbox"/>
261023	WELL	PR	07/16/2009	GW	045-07924	GIBSON GULCH 12-31	SI	<input checked="" type="checkbox"/>

Inspector Name: Murray, Richard

291170	WELL	PR	03/15/2008	GW	045-14314	GGU MILLER 12A-31-691	SI	<input checked="" type="checkbox"/>
291171	WELL	PR	03/27/2008	GW	045-14309	GGU MILLER 23C-31-691	PR	<input checked="" type="checkbox"/>
291172	WELL	PR	03/15/2008	GW	045-14310	GGU MILLER 13D-31-691	PR	<input checked="" type="checkbox"/>
291173	WELL	PR	03/15/2008	GW	045-14311	GGU MILLER 22A-31-691	PR	<input checked="" type="checkbox"/>
291174	WELL	PR	02/10/2008	GW	045-14312	GGU MILLER 22D-31-691	PR	<input checked="" type="checkbox"/>
291175	WELL	PR	03/15/2008	GW	045-14313	GGU MILLER 13C-31-691	SI	<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**Signs/Marker:**

Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
BATTERY	SATISFACTORY	AIRS ID 045-0798-001		

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

Corrective Date: _____

Comment: _____

Corrective Action: _____

Good Housekeeping:

Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
UNUSED EQUIPMENT	SATISFACTORY	Chemical unit at wellhead		

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
Emission Control Device	1	SATISFACTORY			
Horizontal Heated Separator	12	SATISFACTORY			
Gas Meter Run	4	SATISFACTORY			
Compressor	1	SATISFACTORY	Trailer mounted		
Plunger Lift	12	SATISFACTORY			

Inspector Name: Murray, Richard

Gathering Line	1	SATISFACTORY	Trailer mounted		
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Venting:	
Yes/No	Comment
YES	Bradenhead valves open

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

Predrill

Location ID: 211517

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: 211493 Type: WELL API Number: 045-07253 Status: AL Insp. Status: AL

Inspector Name: Murray, Richard

Facility ID: 211517 Type: WELL API Number: 045-07277 Status: PR Insp. Status: SI

Idle Well

Purpose: ☒ Shut In ☐ Temporarily Abandoned Reminder: _____

S/A/V: SATISFACTORY CA Date: _____

CA: _____

Comment: Last production numbers posted Nov 2014

Facility ID: 211518 Type: WELL API Number: 045-07278 Status: PR Insp. Status: SI

Idle Well

Purpose: ☒ Shut In ☐ Temporarily Abandoned Reminder: _____

S/A/V: SATISFACTORY CA Date: _____

CA: _____

Comment: Last production numbers posted Nov 2014

Facility ID: 211519 Type: WELL API Number: 045-07279 Status: PR Insp. Status: PR

Producing Well

Comment: Plunger lift

Facility ID: 260610 Type: WELL API Number: 045-07878 Status: PR Insp. Status: SI

Idle Well

Purpose: ☒ Shut In ☐ Temporarily Abandoned Reminder: _____

S/A/V: SATISFACTORY CA Date: _____

CA: _____

Comment: Last production numbers posted Nov 2014

Facility ID: 260611 Type: WELL API Number: 045-07879 Status: PR Insp. Status: SI

Idle Well

Purpose: ☒ Shut In ☐ Temporarily Abandoned Reminder: _____

S/A/V: SATISFACTORY CA Date: _____

CA: _____

Comment: Last production numbers posted Nov 2014

Facility ID: 261023 Type: WELL API Number: 045-07924 Status: PR Insp. Status: SI

Idle Well

Purpose: ☒ Shut In ☐ Temporarily Abandoned Reminder: _____

S/A/V: SATISFACTORY CA Date: _____

CA: _____

Comment: Last production numbers posted Nov 2014

Facility ID: 291170 Type: WELL API Number: 045-14314 Status: PR Insp. Status: SI

Inspector Name: Murray, Richard

Idle Well

Purpose: ☒ Shut In ☐ Temporarily Abandoned Reminder: _____
S/A/V: SATISFACTORY CA Date: _____
CA: _____
Comment: Last production numbers posted Nov 2014

Facility ID: 291171 Type: WELL API Number: 045-14309 Status: PR Insp. Status: PR

Producing Well

Comment: Plunger lift

Facility ID: 291172 Type: WELL API Number: 045-14310 Status: PR Insp. Status: PR

Producing Well

Comment: Plunger lift

Facility ID: 291173 Type: WELL API Number: 045-14311 Status: PR Insp. Status: PR

Producing Well

Comment: Plunger lift

Facility ID: 291174 Type: WELL API Number: 045-14312 Status: PR Insp. Status: PR

Producing Well

Comment: Plunger lift

Facility ID: 291175 Type: WELL API Number: 045-14313 Status: PR Insp. Status: SI

Idle Well

Purpose: ☒ Shut In ☐ Temporarily Abandoned Reminder: _____
S/A/V: SATISFACTORY CA Date: _____
CA: _____
Comment: Last production numbers posted Nov 2014

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: _____

Inspector Name: Murray, Richard

Pilot: ON 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? _____ 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: _____

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 _____

Inspector Name: Murray, Richard

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:	<div style="border: 1px solid black; height: 20px;"></div>		
Corrective Action:	<div style="border: 1px solid black; height: 20px;"></div>	Date _____	
Overall Final Reclamation _____	Well Release on Active Location <input type="checkbox"/>	Multi-Well Location <input type="checkbox"/>	

Storm Water:

Loc Erosion BMPs	BMP Maintenance	Lease Road Erosion BMPs	Lease BMP Maintenance	Chemical BMPs	Chemical BMP Maintenance	Comment
Seeding	Pass					
Compaction	Pass					
		Compaction	Pass			
Slope Roughening	Pass					
		Ditches	Pass			
		Gravel	Pass			

S/A/V: SATISFACTOR
Y _____ Corrective Date: _____

Comment:

CA:

Pits: ☒ NO SURFACE INDICATION OF PIT