

**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:  
07/22/2015Document Number:  
675201826Overall Inspection:  
SATISFACTORY**FIELD INSPECTION FORM**

|                     |             |        |                 |   |
|---------------------|-------------|--------|-----------------|---|
| Location Identifier | Facility ID | Loc ID | Inspector Name: | On-Site Inspection <input type="checkbox"/> |
|                     | 321997      | 321997 | CONKLIN, CURTIS | 2A Doc Num: _____                           |

**Operator Information:**OGCC Operator Number: 10515Name of Operator: GUNNISON ENERGY LLCAddress: 1801 BROADWAY #1200City: 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 |
|-----------------|-------|--------------------------|---------|
| McWilliams, Dan |       | dan.mcwilliams@oxbow.com |         |
| Cleary, Mike    |       | mike.cleary@oxbow.com    |         |

**Compliance Summary:**QtrQtr: NWNE Sec: 24 Twp: 12S Range: 94W**Inspector Comment:****Related Facilities:**

| Facility ID | Type | Status | Status Date | Well Class | API Num   | Facility Name                | Insp Status |                                     |
|-------------|------|--------|-------------|------------|-----------|------------------------------|-------------|-------------------------------------|
| 272352      | WELL | SI     | 05/08/2006  | GW         | 029-06085 | SPAULDING PEAK<br>1294-24-31 | 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 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                 |         |                   |      |

**Signs/Marker:**

| Type     | Satisfactory/Action Required | Comment                           | Corrective Action | CA Date |
|----------|------------------------------|-----------------------------------|-------------------|---------|
| WELLHEAD | SATISFACTORY                 | Nearest public access not listed. |                   |         |

Inspector Name: CONKLIN, CURTIS

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

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

Comment: 970-874-7697

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

**Spills:**

| Type | Area | Volume | Corrective action | CA Date |
|------|------|--------|-------------------|---------|
|------|------|--------|-------------------|---------|

☐ Multiple Spills and Releases?

**Fencing:**

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

**Equipment:**

| Type  | # | Satisfactory/Action Required | Comment          | Corrective Action | CA Date |
|-------|---|------------------------------|------------------|-------------------|---------|
| Other | 1 | SATISFACTORY                 | Poly water line. |                   |         |

**Venting:**

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

**Flaring:**

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

**Predrill**

Location ID: 321997

**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: 272352 Type: WELL API Number: 029-06085 Status: SI Insp. Status: SI

**Idle Well**Purpose: ☒ Shut In ☐ Temporarily Abandoned Reminder: \_\_\_\_\_

S/A/V: SATISFACTORY CA Date: \_\_\_\_\_

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

Comment: MIT on 7/19/15

**Environmental****Spills/Releases:**

Type of Spill: \_\_\_\_\_ Description: \_\_\_\_\_ Estimated Spill Volume: \_\_\_\_\_

Inspector Name: CONKLIN, CURTIS

|   |  |                              |             |
|---|--|------------------------------|-------------|
| Comment: <input style="width: 700px;" type="text"/>         |  |                              |             |
| Corrective Action: _____                                    |  | Date: _____                  |             |
| Reportable: _____   | GPS: Lat _____                                     | Long _____                   |             |
| Proximity to Surface Water: _____                           |  | Depth to Ground Water: _____ |             |
| <b><u>Water Well:</u></b>                                   |  |                              |             |
| DWR Receipt Num: _____                                      |  | Owner Name: _____            | GPS : _____ |
| Lat _____ Long _____  |  |                              |             |
| <b><u>Field Parameters:</u></b>                             |  |                              |             |
| <input style="width: 300px;" type="text"/>                  |  |                              |             |
| Sample Location: <input style="width: 400px;" type="text"/> |  |                              |             |
| 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: <input style="width: 750px;" type="text"/>  |   |
| 1003a. Debris removed? _____ CM _____  |   |
| CA _____   | CA Date _____   |
| Waste Material Onsite? _____ CM _____  |   |
| CA _____   | CA Date _____   |
| Unused or unneeded equipment onsite? _____ CM _____  |   |
| CA _____   | CA Date _____   |
| Pit, cellars, rat holes and other bores closed? _____ CM _____   |   |
| CA _____   | CA Date _____   |
| Guy line anchors removed? _____ CM _____   |   |
| CA _____   | CA Date _____   |
| Guy line anchors marked? _____ 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? _____              |
| <b>RESTORATION AND REVEGETATION</b>  |   |
| <b><u>Cropland</u></b>   |   |
| Top soil replaced _____  | Recontoured _____ Perennial forage re-established _____ |

Inspector Name: CONKLIN, CURTIS

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                  | Pass                  |               |                          |         |
| Rip Rap          | Pass            |                         |                       |               |                          |         |
| Compaction       | Pass            | Culverts                | Pass                  |               |                          |         |
| Berms            | Pass            | Compaction              | Pass                  |               |                          |         |
| Retention Ponds  | Pass            |                         |                       |               |                          |         |

S/A/V: SATISFACTOR \_\_\_\_\_

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

Y

Comment: Cut slope has area that has sluffed off. See attached photos.

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

Pits: ☒ NO SURFACE INDICATION OF PIT

**Attached Documents**

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

| Document Num | Description | URL   |
|--------------|-------------|---|
| 675201849    | Cut slope   | <a href="http://ogccwebblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3650311">http://ogccwebblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3650311</a> |