

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:
07/22/2015

Document Number:
679900076

Overall Inspection:
SATISFACTORY

FIELD INSPECTION FORM

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	300200	311236	Welsh, Brian	<input type="checkbox"/>	

Operator Information:

OGCC Operator Number: 10489

Name of Operator: AUGUSTUS ENERGY RESOURCES LLC

Address: 2016 GRAND AVENUE #A

City: BILLINGS State: MT Zip: 59102

- 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
Davis, Loni	970-332-3585	ldavis@augustusenergy.com	

Compliance Summary:

QtrQtr: SESE Sec: 13 Twp: 2S Range: 45W

Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Action Required	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
11/29/2012	663902043	PR	PR	SATISFACTORY	P		No

Inspector Comment:

Related Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status	
300200	WELL	PR	05/28/2010	GW	125-11630	BOWMAN 13-16	PR	<input checked="" type="checkbox"/>

Equipment:

Location Inventory

Special Purpose Pits: _____	Drilling Pits: <u>1</u>	Wells: <u>1</u>	Production Pits: _____
Condensate Tanks: _____	Water Tanks: <u>1</u>	Separators: _____	Electric Motors: _____
Gas or Diesel Mortors: <u>1</u>	Cavity Pumps: _____	LACT Unit: _____	Pump Jacks: <u>1</u>
Electric Generators: _____	Gas Pipeline: <u>1</u>	Oil Pipeline: _____	Water Pipeline: <u>1</u>
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	TWO TRACK THROUGH PASTURE		

Signs/Marker:				
Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
WELLHEAD	SATISFACTORY	LEASE SIGN BY GATE AT ENTRANCE		
WELLHEAD	SATISFACTORY	LEASE SIGN BY UNIT		
OTHER	SATISFACTORY	LEASE SIGN BY METER SHED		

Emergency Contact Number (S/A/V): SATISFACTORY Corrective Date: _____

Comment: _____

Corrective Action: _____

Good Housekeeping:				
Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
STORAGE OF SUPL	SATISFACTORY	GAS SCRUBBER DISCONNECTED AND NEATLY STORED ON LOCATION		

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
PUMP JACK	SATISFACTORY	METAL PANELS AROUND UNIT AND WELLHEAD		
OTHER	SATISFACTORY	METER SHED 3/4 FENCED WITH METAL PANELS		

Equipment:					
Type	#	Satisfactory/Action Required	Comment	Corrective Action	CA Date
Gas Meter Run	2	SATISFACTORY	SHARED METER RUN FOR BOWMAN 13-16 AND 18-12 1750' NW OF WELLHEAD		
Ancillary equipment	1	SATISFACTORY	TELEMETRY EQUIPMENT (AT METER SHED). GAS SCRUBBER NOT IN USE		
Prime Mover	0	SATISFACTORY	PRIME MOVER REMOVED FROM UNIT		
Vertical Separator	2	SATISFACTORY	2-VERTICAL GAS SEPARATORS 50% BURIED BY METER SHED		

Pump Jack	1	SATISFACTORY	JENSEN UNIT	
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Facilities: New Tank Tank ID: _____

Contents	#	Capacity	Type	SE GPS
PRODUCED WATER	0		PBV FIBERGLASS	39.882690,-102.358830

S/A/V: _____ Comment: **WATER TANK REMOVED FROM LOCATION**

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
NO	

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

Predrill

Location ID: 300200

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 COA'S

CA: _____ **Date:** _____

Wildlife BMPs:

BMP Type	Comment
PROPOSED BMPs	<p>Best Management Practices</p> <p>Rosetta Resources Operating LP proposes to utilize the following Best Management Practices (BMP's) where appropriate, to prevent or reduce impacts caused by our oil and gas operations:</p> <ul style="list-style-type: none"> • When building new well sites, limit the surface area to be disturbed to just that which is needed. When a new well is drilled and put on production, reclaim the unneeded well pad to reduce the disturbed surface area and allow the landowners to use it for agriculture. • Return the land to near pre -use condition by reforming the surface to match the surrounding area including: terracing, drainage replacement/repair, and re- seeding with native grasses as specified by the Soil Conservation Office. • Spray to control noxious weeds on our locations annually. • Inspect our sites for erosion and install erosion controls such as culverts or find an alternate road route that is less likely to erode. • As much as possible, utilize low impact 2 tracks on lease roads. • Fill drill site pits within 120 days after completion of a new well subject to pit moisture and weather. • Hydrocarbon storage tanks are surrounded by impermeable berms to prevent spills from migrating off -site. • Open top tanks and unattended pits that might contain hydrocarbon are fenced and covered with nets to protect migratory fowl and animals. • Plans are in place to prevent, control, and cleanup hydrocarbon spills.

S/A/V: _____ **Comment:**

CA: **Date:** _____

Stormwater:

Comment: _____

Staking: _____

Inspector Name: Welsh, Brian

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: 300200 Type: WELL API Number: 125-11630 Status: PR Insp. Status: PR

Producing Well

Comment: PRODUCING. CASING PRODUCTION. VALVES ON DOWNSTREAM SIDE OF METER SHED SHUT IN. CENTRAL METER RUN FOR (BOWMAN 13-16 & 18-12) 1750' NW @ 39.88286/-102.35884

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: RANGELAND

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? _____ 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 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: RANGELAND

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 _____

Inspector Name: Welsh, Brian

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			
Gravel	Pass					

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

Comment: ACCESS IS PARTIALLY GRASSE OVER

CA: _____

Pits: NO SURFACE INDICATION OF PIT