

**FORM
INSP**

Rev
05/11

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Document Number:
673502812

Overall Inspection:
SATISFACTORY

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	
	443309	443310	COSTA, RYAN	2A Doc Num:	

OGCC Operator Number: 10399

Name of Operator: NIGHTHAWK PRODUCTION LLC

Address: 1805 SHEA CENTER DR #290

City: HIGHLANDS State: CO Zip: 80129

- | Contact Name | Phone | Email | Comment |
|-----------------|----------------|-------------------------------------|---------|
| Henkin, Joyce | (303) 407-9609 | joycehenkin@nighthawkenenergy.com | |
| Mayland, Harold | (303) 407-9604 | haroldmayland@nighthawkenenergy.com | |

QtrQtr:	SWNE	Sec:	10	Twp:	8S	Range:	55W
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New Construction Inspection

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status	
443309	WELL	XX	09/25/2015		073-06707	HAPPY JACK 7-10	XX	<input checked="checked" type="checkbox"/>

Special Purpose Pits: _____	Drilling Pits: <u>1</u>	Wells: <u>1</u>	Production Pits: _____
Condensate Tanks: _____	Water Tanks: <u>2</u>	Separators: <u>1</u>	Electric Motors: _____
Gas or Diesel Mortors: <u>1</u>	Cavity Pumps: _____	LACT Unit: _____	Pump Jacks: <u>1</u>
Electric Generators: _____	Gas Pipeline: _____	Oil Pipeline: _____	Water Pipeline: _____
Gas Compressors: _____	VOC Combustor: <u>2</u>	Oil Tanks: <u>6</u>	Dehydrator Units: _____
Multi-Well Pits: _____	Pigging Station: _____	Flare: _____	Fuel Tanks: _____

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

Comment: _____

Corrective Action: _____

Type	Area	Volume	Corrective action	CA Date
<input type="checkbox"/> Multiple Spills and Releases?				

Venting:	
Yes/No	Comment

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

Predrill

Location ID: 443309

Site Preparation:

Lease Road Adeq.: SATISFACTORY

Pads: SATISFACTORY

Soil Stockpile: SATISFACTORY

S/A/V: SATISFACT

Corrective Action: _____ Date: _____ CDP Num.: _____

Form 2A COAs:

Group	User	Comment	Date
OGLA	HouseyM	Operator shall provide notice to COGCC 48 hours prior to commencing construction of this Oil and Gas Location via Form 42.	09/24/2015

S/A/V: SATISFACTORY**Comment:****CA:****Date:****Wildlife BMPs:**

BMP Type	Comment
Construction	<p>Certificate to Discharge Under CDPHE General Permit No. COR-030000 Stormwater Discharges Associated with Construction Certification No. COR031825 Prior to construction, perimeter controls will be installed utilizing cuttings from the clearing operations. Once the well pad has been constructed a variety of BMP's shall be utilized for the site specific conditions. BMP's to be utilized may include, but are not limited to:</p> <ul style="list-style-type: none"> -Dirt Ditch/Berm -Erosion Control Blankets -Straw Bale Barrier -Straw Wattles -Seeding -Imported Hard Armor -Check Dams -Culvert/Culvert Protection -Crimped Straw -Silt Fence -Surface Roughening/Surface Rip <p>During construction, each site will be inspected every 14 days and 24-72 hours after any precipitation event causing erosion depending on the current site activities. These inspections will be recorded and maintained at Nighthawk's office. Repairs shall be completed as soon as possible after an inspection reporting BMP repairs are required. Any site specific modifications will be revised on the site plan when implemented at the site. A field wide Stormwater Management Plan (SWMP) for the Project Area is located at Nighthawk's office. Spill Protection Control and Countermeasures (SPCC) plans for the Project Area are stored on file at Nighthawk's office. The field wide SWMP addresses SPCC during construction operations.</p>

S/A/V: SATISFACTORY**Comment:**

Surface roughening was performed around the perimeter of the location.

CA:**Date:****Stormwater:**

Erosion BMPs	Present	Other BMPs	Present
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Inspector Name: COSTA, RYAN

SLOPE ROUGHENING	Yes		
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S/A/V: SATISFACTORY

Corrective Action: _____ Date: _____

Comments: Erosion BMPs: _____

Other BMPs: _____

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: 443309	Type: WELL	API Number: 073-06707	Status: XX	Insp. Status: XX
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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 _____
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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? _____ 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? _____

RESTORATION AND REVEGETATIONCropland

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 _____

Inspector Name: COSTA, RYAN

Debris removed _____	No disturbance /Location never built _____
Access Roads _____	Regraded _____
Gravel removed _____	Contoured _____
_____	Culverts 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 <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
Slope Roughening	Pass					

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

Pits: <input type="checkbox"/> NO SURFACE INDICATION OF PIT
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COGCC Comments		
Comment	User	Date
It appeared that sufficient top soil had been salvaged and properly segregated at the time of inspection. The topsoil pile will need to be properly protected from degradation.	CostaR	10/07/2015

Attached Documents		
You can go to COGCC Images (https://cogcc.state.co.us/weblink/) and search by document number:		
Document Num	Description	URL
673502832	Inspection Photos	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3693897