

**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:
11/10/2015Document Number:
666801601Overall Inspection:
SATISFACTORY**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	211391	335281	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: NENE Sec: 30 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)
04/24/2013	670200375	PR	PR	SATISFACTORY			No
01/17/2013	663800696	PR	PR	ACTION REQUIRED	F		No
04/15/1999	500143015	SR	AL		P		

Inspector Comment:**Related Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status	
211391	WELL	PR	08/08/2000	GW	045-07151	GIBSON GULCH UNIT 1 -30	PR	<input checked="" type="checkbox"/>
263754	WELL	PR	03/01/2011	GW	045-08137	GIBSON GULCH UNIT 2 -30	PR	<input checked="" type="checkbox"/>
284608	WELL	PR	05/10/2007	GW	045-12218	GGU DALEY 41B-30-691	PR	<input checked="" type="checkbox"/>
284609	WELL	PR	05/12/2007	GW	045-12217	GGU DALEY 44A-19-691	PR	<input checked="" type="checkbox"/>
300468	WELL	PR	02/16/2010	GW	045-17905	GGU DALEY 11A-29-691	PR	<input checked="" type="checkbox"/>
300469	WELL	PR	02/16/2010	GW	045-17906	GGU DALEY 12C-29-691	PR	<input checked="" type="checkbox"/>
300470	WELL	PR	02/16/2010	GW	045-17907	GGU DALEY 11D-29-691	PR	<input checked="" type="checkbox"/>
300471	WELL	PR	02/16/2010	GW	045-17908	GGU DALEY 41A-30-691	PR	<input checked="" type="checkbox"/>

Inspector Name: Murray, Richard

300472	WELL	PR	02/16/2010	GW	045-17909	GGU DALEY 44B-19-691	PR	<input checked="" type="checkbox"/>
300473	WELL	PR	02/16/2010	GW	045-17910	GGU DALEY 41C-30-691	PR	<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**Signs/Marker:**

Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
BATTERY	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
Gas Meter Run	0	SATISFACTORY			
Horizontal Separator	0	SATISFACTORY			
Emission Control Device	1	SATISFACTORY			
Plunger Lift	10	SATISFACTORY			
Horizontal Heated Separator	10	SATISFACTORY			
Ancillary equipment	3	SATISFACTORY			

Venting:

Yes/No	Comment
YES	Bradenhead valves open

Flaring:

Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date

Predrill

Location ID: 211391

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: 211391 Type: WELL API Number: 045-07151 Status: PR Insp. Status: PR

Producing Well

Comment: Plunger lift

Facility ID: 263754 Type: WELL API Number: 045-08137 Status: PR Insp. Status: PR

Producing Well

Comment: Plunger lift

Facility ID: 284608 Type: WELL API Number: 045-12218 Status: PR Insp. Status: PR

Producing Well

Comment: Plunger lift

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Facility ID: 284609 Type: WELL API Number: 045-12217 Status: PR Insp. Status: PR

Producing Well

Comment: Plunger lift

Facility ID: 300468 Type: WELL API Number: 045-17905 Status: PR Insp. Status: PR

Producing Well

Comment: Plunger lift

Facility ID: 300469 Type: WELL API Number: 045-17906 Status: PR Insp. Status: PR

Producing Well

Comment: Plunger lift

Facility ID: 300470 Type: WELL API Number: 045-17907 Status: PR Insp. Status: PR

Producing Well

Comment: Plunger lift

Facility ID: 300471 Type: WELL API Number: 045-17908 Status: PR Insp. Status: PR

Producing Well

Comment: Plunger lift

Facility ID: 300472 Type: WELL API Number: 045-17909 Status: PR Insp. Status: PR

Producing Well

Comment: Plunger lift

Facility ID: 300473 Type: WELL API Number: 045-17910 Status: PR Insp. Status: PR

Producing Well

Comment: Plunger lift

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? Pass 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: _____

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:

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
		Culverts	Pass			
Berms	Pass					
		Ditches	Pass			
		Gravel	Pass			

S/A/V: SATISFACTOR
Y

Corrective Date: _____

Comment:

CA:

Pits: ☒ NO SURFACE INDICATION OF PIT