

**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:
11/13/2015Document Number:
673402647

Overall Inspection:

ACTION REQUIRED**FIELD INSPECTION FORM**

| | | | | | |
|---------------------|-------------|--------|-----------------|--------------------------|-------------|
| Location Identifier | Facility ID | Loc ID | Inspector Name: | On-Site Inspection | 2A Doc Num: |
| | 223241 | 312995 | Waldron, Emily | <input type="checkbox"/> | |

Operator Information:OGCC Operator Number: 10407Name of Operator: ANTLER ENERGY LLCAddress: PO BOX 104City: BAGGS State: WY Zip: 82321

- ☒ 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 |
|--------------|-------|-------------------------|---------|
| Neidel, Kris | | kris.neidel@state.co.us | |
| Evans, Clay | | antlerenergy@yahoo.com | |

Compliance Summary:QtrQtr: SWNE Sec: 28 Twp: 11N Range: 97W

| Insp. Date | Doc Num | Insp. Type | Insp Status | Satisfactory /Action Required | PA P/F/I | Pas/Fail (P/F) | Violation (Y/N) |
|------------|-----------|------------|-------------|-------------------------------|----------|----------------|-----------------|
| 08/24/2015 | 673402389 | PR | PR | ACTION REQUIRED | | | No |
| 01/27/2015 | 673401670 | PR | SI | ACTION REQUIRED | | | No |
| 02/24/2014 | 673400284 | PR | PR | ACTION REQUIRED | | | No |
| 03/15/2012 | 662300322 | PR | SI | ALLEGED VIOLATION | | | Yes |
| 04/18/2011 | 200308475 | PR | PR | ACTION REQUIRED | | | Yes |

Inspector Comment:**Related Facilities:**

| Facility ID | Type | Status | Status Date | Well Class | API Num | Facility Name | Insp Status |
|-------------|------|--------|-------------|------------|-----------|--------------------------|--|
| 100422 | PIT | | 09/23/1999 | | - | POWDER WASH FED. 28-7 | <input type="checkbox"/> |
| 100425 | PIT | | 09/23/1999 | | - | POWDER WASH FED. 28-7 | <input type="checkbox"/> |
| 223241 | WELL | PR | 11/15/1985 | OW | 081-06605 | POWDER WASH FEDERAL 28-7 | PR <input checked="" type="checkbox"/> |

Equipment:**Location Inventory**

Inspector Name: Waldron, Emily

| | | | |
|------------------------------|------------------------|---------------------|-------------------------|
| 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

| <u>Signs/Marker:</u> | | | | |
|----------------------|------------------------------|-------------------|---------------------------------------|------------|
| Type | Satisfactory/Action Required | Comment | Corrective Action | CA Date |
| BATTERY | SATISFACTORY | At separator. | | |
| TANK LABELS/PLACARDS | ACTION REQUIRED | No tank labels. | Install sign to comply with rule 210. | 04/11/2014 |
| WELLHEAD | ACTION REQUIRED | No wellhead sign. | Install sign to comply with rule 210. | 04/11/2014 |

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

Corrective Date: _____

Comment: **307-380-7616**

Corrective Action: _____

Good Housekeeping:

| Type | Satisfactory/Action Required | Comment | Corrective Action | CA Date |
|-------|------------------------------|---------------------------|--|------------|
| WEEDS | SATISFACTORY | Annual weeds on location. | Implement and maintain a weed control program. | 12/14/2015 |

Spills:

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

☐ Multiple Spills and Releases?

Fencing/:

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

Equipment:

| Type | # | Satisfactory/Action Required | Comment | Corrective Action | CA Date |
|-----------------------------|---|------------------------------|---|---|------------|
| Horizontal Heated Separator | 2 | SATISFACTORY | Stained soil and dugout area mentioned in previous inspection still visible. Was there a spill? | Finish properly cleaning up release. Work with COGCC environmental staff Kris Neidel to ensure proper clean up. | 10/08/2015 |
| Deadman # & Marked | 4 | SATISFACTORY | | | |
| Pump Jack | 1 | SATISFACTORY | Parrafin, stained soil at wellhead. | Properly clean up current stained soil and parrafin and prevent future leaks and spills. | 10/08/2015 |
| Bird Protectors | | SATISFACTORY | | | |

Inspector Name: Waldron, Emily

| | | | | | |
|---------------------------|---|--------------|---|---|------------|
| Vertical Heated Separator | 2 | SATISFACTORY | Stained soil and dugout area mentioned in previous inspection still visible. Was there a spill? | Finish properly cleaning up release. Work with COGCC environmental staff Kris Neidel to ensure proper clean up. | 10/08/2015 |
|---------------------------|---|--------------|---|---|------------|

Facilities: ☐ New Tank Tank ID: _____

| Contents | # | Capacity | Type | SE GPS |
|----------|---|----------|------------------|-----------------------|
| | 2 | | HEATED STEEL AST | 40.885880,-108.294540 |

| | | | |
|--------------------|--------------|------------------|--|
| S/A/V: | SATISFACTORY | Comment: | |
| Corrective Action: | | Corrective Date: | |

Paint

| | |
|-----------|----------|
| Condition | Adequate |
|-----------|----------|

Other (Content) _____

Other (Capacity) _____

Other (Type) _____

Berms

| Type | Capacity | Permeability (Wall) | Permeability (Base) | Maintenance |
|-------|----------|---------------------|---------------------|-------------|
| Earth | Adequate | | | Inadequate |

| | | | |
|-------------------|--|-----------------|------------|
| Corrective Action | Berms must provide secondary containment with sufficient freeboard to contain precipitation. Berms must be constructed of sufficeintely impervious material to contain a release and must be inspected at regular intervals and maintained as necessary. | Corrective Date | 10/08/2015 |
|-------------------|--|-----------------|------------|

| | |
|---------|--|
| Comment | Weeds and vegetation growing on and in berm. |
|---------|--|

| | |
|------------------------|---------|
| <u>Venting:</u> | |
| Yes/No | Comment |
| NO | |

| <u>Flaring:</u> | | | | |
|------------------------|------------------------------|---------|-------------------|---------|
| Type | Satisfactory/Action Required | Comment | Corrective Action | CA Date |
| | | | | |

Predrill

Location ID: 223241

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: 223241 Type: WELL API Number: 081-06605 Status: PR Insp. Status: PR

Producing Well

Comment: _____

Environmental**Spills/Releases:**

Type of Spill: _____ Description: _____ Estimated Spill Volume: _____

Comment: _____

Corrective Action: _____ Date: _____

Reportable: _____ GPS: Lat _____ Long _____

Inspector Name: Waldron, Emily

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: _____

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 REVEGETATION

Cropland

Top soil replaced _____ Recontoured _____ Perennial forage re-established _____

Non-Cropland

Top soil replaced _____ Recontoured _____ 80% Revegetation _____

1003 f. Weeds Noxious weeds? _____

Inspector Name: Waldron, Emily

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 |
|----------------------|----------------------|-------------------------|-----------------------|----------------------|--------------------------|----------------------|
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |

S/A/V: SATISFACTOR
Y

Corrective Date:

Comment:

CA:

Pits: ☐ NO SURFACE INDICATION OF PIT

Inspector Name: Waldron, Emily

Pit Type: _____ Lined: _____ Pit ID: _____ Lat: _____ Long: _____

Lining:

Liner Type: _____ Liner Condition: _____

Comment: _____

Fencing:

Fencing Type: _____ Fencing Condition: _____

Comment: _____

Netting:

Netting Type: _____ Netting Condition: _____

Comment: _____

Anchor Trench Present: _____ Oil Accumulation: _____ 2+ feet Freeboard: _____

Pit (S/A/V): **ACTION** Comment: **Stained soil at edge of pit and under netting. Pit in tank battery. Two pits associated with this location. 100422 and 100425, neither permitted to current operator.**

Corrective Action: **Please work with COGCC environmental staff Kris Nidel kris.nidel@state.co.us 970-871-1963 to identify which pit ID is appropriate, proper pit operation, and to close pit if not in use.** Date: **10/08/2015**

COGCC Comments

| Comment | User | Date |
|--|----------|------------|
| Follow up to inspection from 8/24/2015 document number 673402389. No corrective actions have been made. | waldrone | 11/13/2015 |

Attached Documents

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

| Document Num | Description | URL |
|--------------|-------------------|---|
| 673402658 | Inspection Photos | http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3722876 |

ACTION REQUIRED

ANY ACTION REQUIRED items listed on this report indicate that the oil and gas facility or the oil and gas operations listed on the report may be in violation of the rules and regulations of the Colorado Oil and Conservation Commission (“COGCC”) and corrective action is required.

There is reasonable cause to believe that a violation of the Oil and Gas Conservation Act, or of any rule, regulation, or order of the Commission, or of any permit issued by the Commission, has occurred. The Operator’s compliance with this Inspection Report is required to resolve these alleged violations. This document requires the Operator to timely respond to the COGCC and to comply with directives as listed by the **Corrective Action Deadline Date**. Failure to do so will result in the issuance of a Notice of Alleged Violation and initiation of enforcement proceedings in which COGCC will seek monetary penalties for the alleged violations pursuant to § 34-60-121, C.R.S. and Rule 523, COGCC Rules of Practice and Procedure, 2 CCR 404-1. (Please note that the COGCC's penalty authority was recently increased to a maximum of \$15,000 per day and penalties are no longer capped at a maximum of \$10,000 per violation.)