

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



Inspection Date:
04/05/2016
Document Number:
666802049

FIELD INSPECTION FORM

| | | | | | |
|---------------------|---------------|---------------|------------------------|--------------------------|-------------|
| Location Identifier | Facility ID | Loc ID | Inspector Name: | On-Site Inspection | 2A Doc Num: |
| | <u>279971</u> | <u>335055</u> | <u>Murray, Richard</u> | <input type="checkbox"/> | |

Overall Inspection:
SATISFACTORY w/ CMT or AR

Operator Information:

| | |
|-----------------------|--|
| OGCC Operator Number: | <u>10447</u> |
| Name of Operator: | <u>URSA OPERATING COMPANY LLC</u> |
| Address: | <u>1050 17TH STREET #1700</u> |
| City: | <u>DENVER</u> State: <u>CO</u> Zip: <u>80265</u> |

- 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 |
|-----------------|--------------|----------------------------|-----------------|
| Freeman, Sarah | | sarah.freeman@state.co.us | |
| Knudson, Dwayne | 970-456-3335 | dknudson@ursaresources.com | All Inspections |

Compliance Summary:

| QtrQtr: | <u>SENW</u> | Sec: | <u>7</u> | Twp: | <u>7S</u> | Range: | <u>91W</u> |
|------------|-------------|------------|-------------|-------------------------------|-----------|----------------|-----------------|
| Insp. Date | Doc Num | Insp. Type | Insp Status | Satisfactory /Action Required | PA P/F/I | Pas/Fail (P/F) | Violation (Y/N) |
| 08/13/2008 | 200193718 | PR | PR | SATISFACTORY | | | No |

Inspector Comment:

Related Facilities:

| Facility ID | Type | Status | Status Date | Well Class | API Num | Facility Name | Insp Status | |
|-------------|------|--------|-------------|------------|-----------|------------------|-------------|-------------------------------------|
| 268723 | WELL | PR | 12/05/2003 | GW | 045-09287 | CSF 22C-07-07-91 | PR | <input checked="" type="checkbox"/> |
| 279971 | WELL | PR | 10/13/2011 | GW | 045-11120 | CSF 11B-07-07-91 | PR | <input checked="" type="checkbox"/> |
| 279974 | WELL | PR | 03/11/2009 | GW | 045-11122 | CSF 21B-07-07-91 | PR | <input checked="" type="checkbox"/> |
| 283835 | WELL | AL | 09/06/2011 | LO | 045-11982 | CSF 12A-07-07-91 | AL | <input checked="" type="checkbox"/> |
| 283836 | WELL | PR | 03/01/2012 | GW | 045-11983 | CSF 31B-07-07-91 | SI | <input type="checkbox"/> |
| 283837 | WELL | PR | 02/21/2012 | GW | 045-11984 | CSF 32B-07-07-91 | PR | <input checked="" type="checkbox"/> |
| 298149 | WELL | AL | 09/06/2011 | LO | 045-17085 | CSF 11A-07-07-91 | AL | <input checked="" type="checkbox"/> |
| 298150 | WELL | XX | 12/11/2012 | LO | 045-17083 | CSF 21A-07-07-91 | XX | <input checked="" type="checkbox"/> |
| 298151 | WELL | PR | 03/01/2012 | GW | 045-17084 | CSF 21C-07-07-91 | PR | <input checked="" type="checkbox"/> |

| | | | | | | | | |
|--------|------|----|------------|----|-----------|------------------|----|-------------------------------------|
| 298152 | WELL | XX | 09/06/2011 | LO | 045-17086 | CSF 31A-07-07-91 | XX | <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 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

Lease Road:

| Type | Satisfactory/Action Required | comment | Corrective Action | Date |
|------|------------------------------|---------|-------------------|------|
| | | | | |

Signs/Marker:

| Type | Satisfactory/Action Required | Comment | Corrective Action | CA Date |
|----------------------|------------------------------|----------------------|-------------------|---------|
| WELLHEAD | SATISFACTORY | | | |
| TANK LABELS/PLACARDS | SATISFACTORY | | | |
| BATTERY | SATISFACTORY | AIRS ID 045-1781-001 | | |

Emergency Contact Number (S/AR): SATISFACTORY

Corrective Date: _____

Comment: _____

Corrective Action: _____

Good Housekeeping:

| Type | Satisfactory/Action Required | Comment | Corrective Action | CA Date |
|------------------|------------------------------|-----------------------------|-------------------|---------|
| UNUSED EQUIPMENT | | Chemical unit at separators | | |

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

Equipment:

| | | |
|-----------------------------------|-------------|--|
| Type: Ancillary equipment | # 0 | Satisfactory/Action Required: SATISFACTORY |
| Comment | | |
| Corrective Action | Date: _____ | |
| Type: Horizontal Heated Separator | # 2 | Satisfactory/Action Required: SATISFACTORY |

| | |
|---------------------------------|--|
| Comment | |
| Corrective Action | Date: |
| Type: Vertical Heated Separator | # 5 Satisfactory/Action Required: SATISFACTORY |
| Comment | |
| Corrective Action | Date: |
| Type: Plunger Lift | # 5 Satisfactory/Action Required: SATISFACTORY |
| Comment | |
| Corrective Action | Date: |

Facilities: New Tank Tank ID: _____

| Contents | # | Capacity | Type | SE GPS |
|--------------------|--------------|----------|------------------------------|------------------|
| PRODUCED WATER | 1 | 400 BBLS | STEEL AST | |
| S/AR | SATISFACTORY | | Comment: Centralized battery | |
| Corrective Action: | | | | Corrective Date: |

Paint

| | |
|------------------|----------|
| Condition | Adequate |
| Other (Content) | _____ |
| Other (Capacity) | _____ |
| Other (Type) | _____ |

Berms

| Type | Capacity | Permeability (Wall) | Permeability (Base) | Maintenance |
|-------------------|----------|---------------------|---------------------|-----------------|
| Metal | | | | |
| Corrective Action | | | | Corrective Date |
| Comment | | | | |

Facilities: New Tank Tank ID: _____

| Contents | # | Capacity | Type | SE GPS |
|--------------------|--------------|----------|-----------|-----------------------|
| CONDENSATE | 2 | 300 BBLS | STEEL AST | 39.462903,-107.599517 |
| S/AR | SATISFACTORY | | Comment: | |
| Corrective Action: | | | | Corrective Date: |

Paint

| | |
|------------------|----------|
| Condition | Adequate |
| Other (Content) | _____ |
| Other (Capacity) | _____ |
| Other (Type) | _____ |

Berms

| Type | Capacity | Permeability (Wall) | Permeability (Base) | Maintenance |
|-------------------|----------|---------------------|---------------------|-----------------|
| Metal | Adequate | Walls Sufficient | Base Sufficient | Adequate |
| Corrective Action | | | | Corrective Date |
| Comment | | | | |

Venting:

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

| | |
|---------|--|
| Comment | |
|---------|--|

Flaring:

| | |
|--------------------|------------------------------|
| Type | Satisfactory/Action Required |
| Comment: | |
| Corrective Action: | Correct Action Date: |

Predrill

Location ID: 279971

Site Preparation:

Lease Road Adeq.: _____ Pads: _____ Soil Stockpile: _____

S/AR: _____

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

Form 2A COAs:

S/AR: _____ **Comment:** _____

CA: _____ **Date:** _____

Wildlife BMPs:

S/AR: _____ **Comment:** _____

CA: _____ **Date:** _____

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: 268723 Type: WELL API Number: 045-09287 Status: PR Insp. Status: PR

Producing Well

Comment: Plunger lift

Facility ID: 279971 Type: WELL API Number: 045-11120 Status: PR Insp. Status: PR

Producing Well

Comment: **Plunger lift**

Facility ID: 279974 Type: WELL API Number: 045-11122 Status: PR Insp. Status: PR

Producing Well

Comment: **Plunger lift**

Facility ID: 283835 Type: WELL API Number: 045-11982 Status: AL Insp. Status: AL

Workover

Comment: **Conductor pipe set**

Facility ID: 283837 Type: WELL API Number: 045-11984 Status: PR Insp. Status: PR

Producing Well

Comment: **Plunger lift**

Facility ID: 298149 Type: WELL API Number: 045-17085 Status: AL Insp. Status: AL

Workover

Comment: **Conductor pipe set**

Facility ID: 298150 Type: WELL API Number: 045-17083 Status: XX Insp. Status: XX

Workover

Comment: **Drilling permit expired 1/3/2015, Action required to update well status. Conductor pipe set**

Facility ID: 298151 Type: WELL API Number: 045-17084 Status: PR Insp. Status: PR

Producing Well

Comment: **Producing**

Facility ID: 298152 Type: WELL API Number: 045-17086 Status: XX Insp. Status: XX

Workover

Comment: **Form 4 on file Document number 400512439 to change well status to Abandoned Location, Conductor pipe set**

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: _____

Inspector Name: Murray, Richard

Emission Control Burner (ECB): N

Comment:

Pilot: Wildlife Protection Devices (fired vessels): YES

Reclamation - Storm Water - Pit

Interim Reclamation:

Date Interim Reclamation Started: Date Interim Reclamation Completed:

Land Use:

Comment:

1003a. Waste and Debris removed? Pass

CM CA CA Date

Unused or unneeded equipment onsite? In

CM CA CA Date

Pit, cellars, rat holes and other bores closed? 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:

Inspector Name: Murray, Richard

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 | | | |
| Waddles | Pass | | | | | |
| | | Retention Ponds | Pass | | | |
| Rip Rap | Pass | | | | | |
| Gravel | Pass | | | | | |
| | | Culverts | Pass | | | |
| | | Ditches | Pass | | | |
| Seeding | Pass | | | | | |

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

Comment: _____

CA: _____

Pits: NO SURFACE INDICATION OF PIT