

**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:

06/07/2016

Document Number:

666802233

Overall Inspection:

SATISFACTORY**FIELD INSPECTION FORM**

| | | | | | |
|---------------------|-------------|--------|-----------------|--------------------------|-------------|
| Location Identifier | Facility ID | Loc ID | Inspector Name: | On-Site Inspection | 2A Doc Num: |
| | 296459 | 336037 | Murray, Richard | <input type="checkbox"/> | |

Operator Information:OGCC Operator Number: 10447Name of Operator: URSA OPERATING COMPANY LLCAddress: 1050 17TH STREET #1700City: DENVER State: CO Zip: 80265

- ☐ 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 |
|-----------------|--------------|----------------------------|-----------------|
| Knudson, Dwayne | 970-456-3335 | dknudson@ursaresources.com | All Inspections |

Compliance Summary:QtrQtr: NWNE Sec: 14 Twp: 6S Range: 93W

| Insp. Date | Doc Num | Insp. Type | Insp Status | Satisfactory /Action Required | PA P/F/I | Pas/Fail (P/F) | Violation (Y/N) |
|------------|-----------|------------|-------------|-------------------------------|----------|----------------|-----------------|
| 08/07/2013 | 670200740 | PR | PR | SATISFACTORY | | | No |
| 12/10/2010 | 200287172 | PR | PR | SATISFACTORY | | | No |
| 06/25/2010 | 200261398 | SR | PR | SATISFACTORY | I | | No |
| 08/15/2007 | 200193842 | DG | DG | SATISFACTORY | | | No |

Inspector Comment:

Inspection does not address action required items noted in previous inspection on AL with conductor pipe set

Related Facilities:

| Facility ID | Type | Status | Status Date | Well Class | API Num | Facility Name | Insp Status | |
|-------------|------|--------|-------------|------------|-----------|------------------|-------------|-------------------------------------|
| 295456 | WELL | AL | 06/24/2013 | LO | 045-15762 | Gypsum Ranch B1 | AL | <input type="checkbox"/> |
| 295457 | WELL | AL | 06/24/2013 | LO | 045-15763 | Gypsum Ranch B2 | AL | <input type="checkbox"/> |
| 296416 | WELL | PR | 06/10/2008 | GW | 045-16013 | GYPSUM RANCH B3 | PR | <input checked="" type="checkbox"/> |
| 296417 | WELL | AL | 06/24/2013 | LO | 045-16014 | Gypsum Ranch B12 | AL | <input type="checkbox"/> |
| 296454 | WELL | PR | 06/13/2008 | GW | 045-16036 | GYPSUM RANCH B4 | PR | <input checked="" type="checkbox"/> |
| 296455 | WELL | AL | 06/24/2013 | LO | 045-16037 | Gypsum Ranch B5 | AL | <input checked="" type="checkbox"/> |
| 296456 | WELL | AL | 06/24/2013 | LO | 045-16038 | Gypsum Ranch B6 | AL | <input type="checkbox"/> |
| 296457 | WELL | DG | 04/16/2008 | GW | 045-16039 | GYPSUM RANCH B7 | DG | <input checked="" type="checkbox"/> |

Inspector Name: Murray, Richard

| | | | | | | | | |
|--------|-----------------|----|------------|----|-----------|-----------------------|----|-------------------------------------|
| 296458 | WELL | AL | 06/24/2013 | LO | 045-16040 | Gypsum Ranch B8 | AL | <input type="checkbox"/> |
| 296459 | WELL | PR | 06/13/2008 | GW | 045-16041 | GYPSUM RANCH B9 | PR | <input checked="" type="checkbox"/> |
| 296460 | WELL | AL | 06/24/2013 | LO | 045-16042 | Gypsum Ranch B11 | AL | <input checked="" type="checkbox"/> |
| 296461 | WELL | PR | 02/01/2012 | GW | 045-16043 | GYPSUM RANCH B13 | PR | <input checked="" type="checkbox"/> |
| 299255 | WELL | AL | 06/24/2013 | LO | 045-17626 | Gypsum Ranch B10 | AL | <input type="checkbox"/> |
| 426957 | NONFACILIT Y | AC | 12/19/2011 | | - | GYPSUM RANCH B PAD | AC | <input 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: _____ |

LocationLease Road:

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

Signs/Marker:

| Type | Satisfactory/Action Required | Comment | Corrective Action | CA Date |
|---------|---------------------------------|------------------|-------------------|---------|
| BATTERY | SATISFACTORY | AIRS ID 045-1790 | | |

Emergency Contact Number (S/AR): SATISFACTORY

Corrective Date: _____

Comment: _____

Corrective Action: _____

Good Housekeeping:

| Type | Satisfactory/Action Required | Comment | Corrective Action | CA Date |
|------|---------------------------------|---------|-------------------|---------|
| | | | | |

Spills:

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

☐ Multiple Spills and Releases?Fencing/:

| Type | Satisfactory/Action Required | Comment | Corrective Action | CA Date |
|------|---------------------------------|---------|-------------------|---------|
| | | | | |

Equipment:

| | | |
|----------------------------------|-----|--|
| Type: Emission Control Device | # 1 | Satisfactory/Action Required: SATISFACTORY |
|----------------------------------|-----|--|

Inspector Name: Murray, Richard

| | | | |
|-----------------------------------|-----|-------------------------------|--------------|
| Comment | | | |
| Corrective Action | | Date: | |
| Type: Plunger Lift | # 4 | Satisfactory/Action Required: | SATISFACTORY |
| Comment | | | |
| Corrective Action | | Date: | |
| Type: Horizontal Heated Separator | # 4 | Satisfactory/Action Required: | SATISFACTORY |
| Comment | | | |
| Corrective Action | | Date: | |

Facilities: ☐ New Tank Tank ID: _____

| Contents | # | Capacity | Type | SE GPS |
|----------------|---|----------|-----------|-----------------------|
| PRODUCED WATER | 3 | 300 BBLS | STEEL AST | 39.531334,-107.740724 |

| | | | | |
|--------------------|--------------|----------|--|------------------|
| 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: 296459

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: 296416 Type: WELL API Number: 045-16013 Status: PR Insp. Status: PR

Producing WellComment: **Plunger lift**

Facility ID: 296454 Type: WELL API Number: 045-16036 Status: PR Insp. Status: PR

Producing WellComment: **Plunger lift**

Facility ID: 296455 Type: WELL API Number: 045-16037 Status: AL Insp. Status: AL

Idle Well

Purpose: ☐ Shut In ☐ Temporarily Abandoned Reminder: _____
 S/A/V: _____ CA Date: _____
 CA: _____
 Comment: **Conductor pipe set**

Facility ID: 296457 Type: WELL API Number: 045-16039 Status: DG Insp. Status: DG

Well Drilling

Rig: Rig Name: _____ Pusher/Rig Manager: _____
 Permit Posted: _____ Access Sign: _____

Well Control Equipment:

Pipe Ram: _____ Blind Ram: _____ Hydril Type: _____
 Pressure Test BOP: _____ Test Pressure PSI: _____ Safety Plan: _____

Drill Fluids Management:

Lined Pit: _____ Unlined Pit: _____ Closed Loop: _____ Semi-Closed Loop: _____
 Multi-Well: _____ Disposal Location: _____

Comment:

No drilling rig on location, surface casing set

Facility ID: 296459 Type: WELL API Number: 045-16041 Status: PR Insp. Status: PR

Producing Well

Comment: **Plunger lift**

Facility ID: 296460 Type: WELL API Number: 045-16042 Status: AL Insp. Status: AL

Idle Well

Purpose: ☐ Shut In ☐ Temporarily Abandoned Reminder: _____
 S/A/V: _____ CA Date: _____
 CA: _____
 Comment: **Conductor pipe set**

Facility ID: 296461 Type: WELL API Number: 045-16043 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: _____

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. Waste and Debris removed? 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 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:

Inspector Name: Murray, Richard

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 |
|------------------|-----------------|-------------------------|-----------------------|---------------|--------------------------|---------|
| | | Culverts | Pass | | | |
| | | Gravel | Pass | | | |
| Gravel | Pass | | | | | |
| Culverts | Pass | | | | | |
| | | Ditches | Pass | | | |
| Berms | Pass | | | | | |

S/A/V: SATISFACTOR
Y _____

Corrective Date: _____

Comment: _____

CA: _____

Pits: ☒ NO SURFACE INDICATION OF PIT