

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:
06/06/2016
Document Number:
666802235
Overall Inspection:
SATISFACTORY

FIELD INSPECTION FORM

| | | | | | |
|---------------------|---------------|---------------|------------------------|--------------------------|-------------|
| Location Identifier | Facility ID | Loc ID | Inspector Name: | On-Site Inspection | 2A Doc Num: |
| | <u>283411</u> | <u>311651</u> | <u>Murray, Richard</u> | <input type="checkbox"/> | |

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

Compliance Summary:

| | | | | | | | |
|---------|-------------|------|-----------|------|-----------|--------|------------|
| QtrQtr: | <u>NWNW</u> | Sec: | <u>13</u> | Twp: | <u>6S</u> | Range: | <u>93W</u> |
|---------|-------------|------|-----------|------|-----------|--------|------------|

| Insp. Date | Doc Num | Insp. Type | Insp Status | Satisfactory /Action Required | PA P/F/I | Pas/Fail (P/F) | Violation (Y/N) |
|------------|-----------|------------|-------------|-------------------------------|----------|----------------|-----------------|
| 12/10/2010 | 200287150 | PR | PR | SATISFACTORY | | | No |
| 06/08/2010 | 200254310 | SR | PR | SATISFACTORY | I | | No |

Inspector Comment:

Inspection is for wells with status of XX, Drilling permits expired OCT. 2013

Related Facilities:

| Facility ID | Type | Status | Status Date | Well Class | API Num | Facility Name | Insp Status | |
|-------------|------|--------|-------------|------------|-----------|---------------|-------------|-------------------------------------|
| 283411 | WELL | PR | 10/25/2006 | GW | 045-11917 | SNYDER A 1 | PR | <input type="checkbox"/> |
| 285152 | WELL | PR | 06/05/2007 | GW | 045-12398 | SNYDER A10 | PR | <input type="checkbox"/> |
| 285153 | WELL | PR | 10/13/2011 | GW | 045-12397 | SNYDER A3 | PR | <input type="checkbox"/> |
| 285154 | WELL | PR | 06/05/2007 | GW | 045-12396 | SNYDER A4 | PR | <input type="checkbox"/> |
| 285155 | WELL | PR | 12/11/2007 | GW | 045-12395 | SNYDER A5 | PR | <input type="checkbox"/> |
| 285156 | WELL | PR | 10/01/2012 | GW | 045-12394 | SNYDER A9 | PR | <input type="checkbox"/> |
| 289759 | WELL | XX | 09/26/2011 | LO | 045-13874 | Snyder A2 | XX | <input checked="" type="checkbox"/> |
| 289760 | WELL | XX | 09/26/2011 | LO | 045-13873 | Snyder A8 | XX | <input checked="" type="checkbox"/> |
| 289761 | WELL | PR | 11/04/2011 | GW | 045-13872 | SNYDER A7 | PR | <input type="checkbox"/> |

Inspector Name: Murray, Richard

| | | | | | | | | |
|--------|------|----|------------|----|-----------|------------|----|-------------------------------------|
| 289762 | WELL | XX | 09/26/2011 | LO | 045-13871 | Snyder A6 | XX | <input checked="" type="checkbox"/> |
| 290978 | WELL | PR | 03/30/2012 | GW | 045-14241 | SNYDER A11 | PR | <input type="checkbox"/> |
| 292322 | WELL | XX | 08/28/2009 | GW | 045-14680 | Snyder A15 | XX | <input type="checkbox"/> |
| 292323 | WELL | XX | 09/26/2011 | LO | 045-14679 | Snyder A14 | XX | <input type="checkbox"/> |
| 292324 | WELL | PR | 09/19/2007 | GW | 045-14678 | SNYDER A13 | PR | <input type="checkbox"/> |
| 292325 | WELL | PR | 09/19/2007 | GW | 045-14677 | SNYDER A12 | PR | <input type="checkbox"/> |
| 413201 | WELL | XX | 09/26/2011 | LO | 045-18738 | Snyder A19 | XX | <input checked="" type="checkbox"/> |
| 413202 | WELL | XX | 09/26/2011 | LO | 045-18736 | Snyder A17 | XX | <input checked="" type="checkbox"/> |
| 413203 | WELL | XX | 09/26/2011 | LO | 045-18737 | Snyder A18 | 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 |
|------|------------------------------|---------|-------------------|---------|
| | | | | |

Emergency Contact Number (S/AR): _____ 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: | # | Satisfactory/Action Required: | | |
| Comment | | | | |
| Corrective Action | | | | Date: |

| Venting: | |
|-----------------|--|
| Yes/No | |
| Comment | |

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

Predrill

Location ID: 283411
 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: <u>289759</u> | Type: <u>WELL</u> | API Number: <u>045-13874</u> | Status: <u>XX</u> | Insp. Status: <u>XX</u> |
| Facility ID: <u>289760</u> | Type: <u>WELL</u> | API Number: <u>045-13873</u> | Status: <u>XX</u> | Insp. Status: <u>XX</u> |
| Facility ID: <u>289762</u> | Type: <u>WELL</u> | API Number: <u>045-13871</u> | Status: <u>XX</u> | Insp. Status: <u>XX</u> |
| Facility ID: <u>413201</u> | Type: <u>WELL</u> | API Number: <u>045-18738</u> | Status: <u>XX</u> | Insp. Status: <u>XX</u> |
| Facility ID: <u>413202</u> | Type: <u>WELL</u> | API Number: <u>045-18736</u> | Status: <u>XX</u> | Insp. Status: <u>XX</u> |
| Facility ID: <u>413203</u> | Type: <u>WELL</u> | API Number: <u>045-18737</u> | Status: <u>XX</u> | Insp. Status: <u>XX</u> |

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:

Lat _____ Long _____
DWR Receipt Num: _____ Owner Name: _____ GPS : _____

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. Waste and Debris removed? _____
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 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 _____

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

S/A/V: _____ Corrective Date: _____

Comment:

CA:

Pits: NO SURFACE INDICATION OF PIT