

**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:

06/16/2016

Document Number:

673503430

Overall Inspection:

ACTION REQUIRED**FIELD INSPECTION FORM**

| | | | | | |
|---------------------|-------------|--------|-----------------|--------------------------|-------------|
| Location Identifier | Facility ID | Loc ID | Inspector Name: | On-Site Inspection | 2A Doc Num: |
| | 297957 | 309646 | COSTA, RYAN | <input type="checkbox"/> | |

Operator Information:

OGCC Operator Number: 10221

Name of Operator: RUNNING FOXES PETROLEUM INC

Address: 6855 S. HAVANA ST #400

City: CENTENNIAL State: CO Zip: 80112

- ☐ 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 |
|--------------|-------|-------------------------------|---------|
| Joe Taglieri | | joe.taglieri@runningfoxes.com | |

Compliance Summary:QtrQtr: NESE Sec: 1 Twp: 13S Range: 56W

| Insp. Date | Doc Num | Insp. Type | Insp Status | Satisfactory /Action Required | PA P/F/I | Pas/Fail (P/F) | Violation (Y/N) |
|------------|-----------|------------|-------------|-------------------------------|----------|----------------|-----------------|
| 07/31/2014 | 673501421 | PA | PA | ACTION REQUIRED | | Fail | No |
| 11/25/2013 | 673700058 | PA | PA | ACTION REQUIRED | | I | No |
| 08/21/2013 | 668601285 | PA | PA | SATISFACTORY | | I | No |
| 12/18/2012 | 668200368 | PA | PA | ACTION REQUIRED | | Fail | No |
| 04/06/2012 | 664000462 | PA | PA | ACTION REQUIRED | | Fail | No |
| 01/26/2012 | 664000334 | PA | PA | ACTION REQUIRED | | Fail | No |
| 06/14/2011 | 200313012 | CO | PA | ACTION REQUIRED | F | Fail | Yes |
| 05/10/2011 | 200310613 | SR | PA | ACTION REQUIRED | F | Fail | Yes |
| 01/27/2011 | 200293333 | SR | PA | ACTION REQUIRED | | | Yes |
| 01/27/2011 | 200293326 | CA | PA | SATISFACTORY | | | No |
| 01/05/2011 | 200292594 | CO | IO | ACTION REQUIRED | | | Yes |
| 07/07/2010 | 200264698 | SR | TA | ACTION REQUIRED | I | | Yes |
| 02/22/2010 | 200232146 | PR | WO | ACTION REQUIRED | | | Yes |
| 12/03/2009 | 200223544 | PR | WO | ACTION REQUIRED | | | Yes |
| 12/22/2008 | 200201283 | DG | DG | SATISFACTORY | | | No |

Inspector Comment:Reclamation Inspection**Related Facilities:**

| Facility ID | Type | Status | Status Date | Well Class | API Num | Facility Name | Insp Status | |
|-------------|------|--------|-------------|------------|-----------|------------------|-------------|-------------------------------------|
| 297957 | WELL | PA | 01/27/2011 | OW | 073-06348 | JOLLY RANCH 9C-1 | RI | <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**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: 297957

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: 297957 Type: WELL API Number: 073-06348 Status: PA Insp. Status: RI

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 REVEGETATIONCropland

Top soil replaced _____

Recontoured _____

Perennial forage re-established _____

Non-Cropland

Top soil replaced _____

Recontoured _____

80% Revegetation _____

1003 f. Weeds Noxious weeds? _____

Comment: _____

Inspector Name: COSTA, RYAN

Overall Interim Reclamation

Final Reclamation/ Abandoned Location:

Date Final Reclamation Started: _____

Date Final Reclamation Completed: _____

Final Land Use: _____

Reminder: _____

Comment: _____

Well plugged Pass

Pit mouse/rat holes, cellars backfilled Pass

Debris removed Pass

No disturbance /Location never built _____

Access Roads Regraded Pass

Contoured Pass

Culverts removed Pass

Gravel removed Pass

Location and associated production facilities reclaimed _____

Locations, facilities, roads, recontoured Pass

Compaction alleviation _____

Dust and erosion control In

Non cropland: Revegetated 80% Fail

Cropland: perennial forage _____

Weeds present _____

Subsidence _____

Comment: _____

The location does not contain adequate vegetation cover. There is undesirable vegetation growth throughout the location. Additional reclamation practices are needed to facilitate desirable vegetation establishment. See Attached Photos

Corrective Action: _____

Submit a form 4 notice for final reclamation indicating when the approximate work will commence and providing a description of the proposed work.

Date

07/01/2016

Overall Final Reclamation Fail

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: SATISFACTOR
Y

Corrective Date: _____

Comment: _____

CA: _____

Pits: ☒ NO SURFACE INDICATION OF PIT

COGCC Comments

| Comment | User | Date |
|---|--------|------------|
| Establish vegetation with total perennial non-invasive plant cover of at least eighty (80) percent of pre-disturbance or reference area levels. Continue to monitor and manage this site until the Final Reclamation requirements are achieved. | CostaR | 06/20/2016 |

Attached Documents

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

| Document Num | Description | URL |
|--------------|-----------------------|---|
| 673503431 | Inspection Photos | http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3882203 |
| 673503432 | Vegetation Cover Data | http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3882204 |