

**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:

06/24/2016

Document Number:

668004541

Overall Inspection:

SATISFACTORY**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	257037	334522	DURAN, JOHN	<input type="checkbox"/>	

Operator Information:OGCC Operator Number: 10467Name of Operator: TABULA RASA ENERGY LLCAddress: 12012 WICKCHESTER LANE #660City: HOUSTON State: TX Zip: 77079

- ☐ 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
Falk, Brandon	719-742-6900/719-989-7130	bfalk@tabularasa.com	Plant Supervisor
Labowskie, Steve		steve.labowskie@state.co.us	

Compliance Summary:QtrQtr: NWNE Sec: 4 Twp: 29S Range: 69W

Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Action Required	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
06/21/2016	668004533	PR	SI	SC			No
07/29/2015	668003626	SI	SI	SATISFACTORY			No
07/16/2014	668002343	PR	PR	SATISFACTORY	P		No
11/06/2012	668200294	PR	PR	SATISFACTORY	I		No
05/10/2011	200310210	PR	PR	SATISFACTORY			No
06/19/2003	200040904	PR	SI	ACTION REQUIRED		Fail	Yes
11/19/2002	200031774	ID	SI	ACTION REQUIRED	I	Fail	Yes
10/16/2000	200011927	DG	WO	SATISFACTORY	I	Pass	No

Inspector Comment:**Related Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status	
257037	WELL	PR	12/01/2015	GW	055-06225	HARRY-WILLIS 7	PA	<input checked="" type="checkbox"/>
265130	WELL	PR	10/31/2007	GW	055-06287	HARRY WILLIS 4	PR	<input type="checkbox"/>

Equipment:Location Inventory

Inspector Name: DURAN, JOHN

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			

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
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☐ Multiple Spills and Releases?

Fencing/:

Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date

Equipment:

Type: Ancillary equipment	# 1	Satisfactory/Action Required: SATISFACTORY
Comment	Wellhead and pipeline for Harry Willis #4.	
Corrective Action		Date: _____
Type: Deadman # & Marked	# 4	Satisfactory/Action Required: SATISFACTORY
Comment		
Corrective Action		Date: _____

Venting:

Yes/No	
Comment	

Flaring:

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

Predrill

Location ID: 257037

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: 257037 Type: WELL API Number: 055-06225 Status: PR Insp. Status: PA

Cement**Cement Contractor**Contractor Name: Basic EnergyContractor Phone: 970-867-2766**Surface Casing**Cement Volume (sx): 103 sxsCirculate to Surface: YES

Cement Fall Back: _____

Top Job, 1" Volume: _____

Intermediate CasingCement Volume (sxs): 40 sxsGood Return During Job: YES**Production Casing**

Cement Volume (sx): _____

Good Return During Job: _____

Plugging OperationsDepth Plugs(feet range): 870 - 0 ft.Cement Volume (sx): 143Good Return During Job: YESCement Type: Neat G grey

Comment: On site at 7:45am. Tagged Production CSG plug at 1645 ft at 7:30am. Wireline perforated at 870 ft at 7:40am. At 7:45am start laying down 27 joints. By 830am rig crew has tripped into hole with 23 joints to a depth of 743 ft (737ft + 6 ft packer). At 8:35am cementers start pumping cement. I take sample at 8:40am (Cmt Wt = 15.5 lbs/gal). At 8:45 am cementers finish pumping 40 sxs. At 8:48am rig crew starts tripping out TBG. By 9:00am rig crew has finished tripping out TBG. At 9:03 am Cutters Wireline starts setting up to perforate. There is a collar at 262 ft. At 9:10am Cutters Wireline has perforated at 260 ft. At 9:15am start pumping water for circulation. At 9:54am cementers start pumping cement. At 9:59am I take a cement sample (CMT Wt = 15.6 lbs/gal). At 10:07am I witness cement to surface catch tank. The cementers have pumped 98 sxs of cement. The CSG is cut 4 ft below surface and an additional 5 sxs of cement is pumped to top off cement in CSG. Witness cement to surface(-4ft). Total sxs of cement in hole is 195 sxs. A plate is welded on top of CSG. The plate has the following Information : Harry Willis#7, Huerfano County, NWNE - 4 - T29S - R69W , (APi# 05-055-06225). Grader fills in hole with dirt. Off site at 2:20pm.

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): _____

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: _____

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 _____

Inspector Name: DURAN, JOHN

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	Gravel	Pass			

S/A/V: SATISFACTOR

Corrective Date: _____

Y

Comment: _____

CA: _____

Pits: ☒ NO SURFACE INDICATION OF PIT

COGCC Comments

Comment	User	Date
Satisfactory for P/A on H.W #7. H.W. #4 on same well pad. Co. Man : Gary Valdez, Rig and cementers : Basic Energy Services (Joe Herrera), Water : M & R Trucking, Inc., Tool Man : Paco Salinas (C.F. Service Supply), Wireline : Cutters Wireline (Brock Norris).	duranj	06/24/2016