

**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:

06/22/2016

Document Number:

680702190

Overall Inspection:

SATISFACTORY**FIELD INSPECTION FORM**

|                     |             |        |                 |                          |             |
|---------------------|-------------|--------|-----------------|--------------------------|-------------|
| Location Identifier | Facility ID | Loc ID | Inspector Name: | On-Site Inspection       | 2A Doc Num: |
|                     | 278316      | 305484 | Peterson, Tom   | <input type="checkbox"/> |             |

**Operator Information:**OGCC Operator Number: 10373Name of Operator: NGL WATER SOLUTIONS DJ LLCAddress: 3773 CHERRY CRK NORTH DR #1000City: DENVER State: CO Zip: 80209

- ☐ 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 |
|-----------------|----------------|----------------------------|---------|
| Patterson, Josh | (303) 536-4408 | joshua.patterson@nglep.com |         |

**Compliance Summary:**QtrQtr: SESE Sec: 8 Twp: 4N Range: 64W

| Insp. Date | Doc Num   | Insp. Type | Insp Status | Satisfactory /Action Required | PA P/F/I | Pas/Fail (P/F) | Violation (Y/N) |
|------------|-----------|------------|-------------|-------------------------------|----------|----------------|-----------------|
| 07/15/2015 | 674102466 | IJ         | AC          | SATISFACTORY                  |          |                | No              |
| 06/25/2014 | 674100960 | IJ         | IJ          | SATISFACTORY                  |          |                | No              |
| 09/18/2013 | 670501748 | IJ         | IJ          | SATISFACTORY                  |          |                | No              |
| 07/16/2012 | 661601727 | IJ         | AC          | SATISFACTORY                  |          |                | No              |
| 03/10/2012 | 661600859 | IJ         | AC          | SATISFACTORY                  |          |                | No              |
| 03/10/2012 | 661600858 | IJ         | IJ          | SATISFACTORY                  |          |                | No              |
| 06/16/2011 | 200312717 | RT         | AC          | SATISFACTORY                  |          |                | No              |
| 05/06/2010 | 200246711 | MI         | AC          | SATISFACTORY                  |          |                | No              |
| 05/28/2009 | 200211252 | PR         | PR          | SATISFACTORY                  |          |                | No              |
| 05/28/2009 | 200211255 | RT         | AC          | SATISFACTORY                  | I        |                | No              |
| 06/05/2008 | 200190604 | RT         | AC          | SATISFACTORY                  |          |                | No              |
| 05/31/2007 | 200112290 | RT         | AC          | SATISFACTORY                  |          | Pass           | No              |
| 06/16/2006 | 200091610 | RT         | AC          | SATISFACTORY                  |          | Pass           | No              |
| 09/26/2005 | 200077204 | MT         | WO          | ACTION REQUIRED               |          | Fail           | Yes             |

**Inspector Comment:****Related Facilities:**

| Facility ID | Type         | Status | Status Date | Well Class | API Num   | Facility Name    | Insp Status |                                     |
|-------------|--------------|--------|-------------|------------|-----------|------------------|-------------|-------------------------------------|
| 159139      | UIC DISPOSAL | AC     | 08/31/2005  | DSPW       | -         | NGL FACILITY C1A | AC          | <input type="checkbox"/>            |
| 278316      | WELL         | IJ     | 06/16/2005  | DSPW       | 123-23038 | NGL C1A          | AC          | <input checked="" type="checkbox"/> |

|        |      |    |            |      |           |         |    |                                     |
|--------|------|----|------------|------|-----------|---------|----|-------------------------------------|
| 439321 | WELL | IJ | 03/25/2015 | DSPW | 123-40377 | NGL C1C | AC | <input checked="" type="checkbox"/> |
|--------|------|----|------------|------|-----------|---------|----|-------------------------------------|

**Equipment:**Location Inventory

|                              |                        |                     |                         |
|------------------------------|------------------------|---------------------|-------------------------|
| Special Purpose Pits: _____  | Drilling Pits: _____   | Wells: <u>2</u>     | 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 |
|------|------|--------|-------------------|---------|
|      |      |        |                   |         |

☐ 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: 278316

Lease Road Adeq.: \_\_\_\_\_

Pads: \_\_\_\_\_

Soil Stockpile: \_\_\_\_\_

**S/AR:** \_\_\_\_\_

Corrective Action: \_\_\_\_\_ Date: \_\_\_\_\_ CDP Num.: \_\_\_\_\_

**Form 2A COAs:**

| Group | User   | Comment  | Date       |
|-------|--------|--|------------|
| OGLA  | youngr | Operator shall provide notice to COGCC 48 hours prior to commencing construction of this Oil and Gas Location via Form 42. | 10/03/2014 |

**S/AR:** \_\_\_\_\_ **Comment:** \_\_\_\_\_**CA:** \_\_\_\_\_ **Date:** \_\_\_\_\_**Wildlife BMPs:**

| BMP Type                       | Comment  |
|--------------------------------|--|
| Drilling/Completion Operations | Guy line anchors. All guy line anchors shall be brightly marked pursuant to Rule 604.c (2)Q.   |
| Drilling/Completion Operations | Blowout preventer equipment ("BOPE"). A double ram and annular preventer will be used during drilling. At least the drilling company shall have a valid well blowout prevention certifications. Stabbing valves shall be installed in the event of reverse circulation and shall be prior tested with low and high pressure fluid. |
| Planning                       | This will be a 2 well pad with an existing facility already in operation for the separation of hydrocarbons and waste, the separated produced water shall be filtered prior to injection.  |
| General Housekeeping           | Removal of surface trash. All trash, debris and material not intrinsic to the operation of the oil and gas facility shall be removed and legally disposed of as is applicable.   |
| Drilling/Completion Operations | Control of fire hazards. All materials which are considered fire hazards shall be a minimum of 25' from the wellhead tanks or separators. Electrical equipment shall comply with API RP 500 and will comply with the current national electrical code. An emergency response plan has been generated for this site.                |
| Traffic control                | Access road: The access road will be constructed to accommodate local emergency vehicles. This road will be maintained for access at all times.  |
| Final Reclamation              | Well site cleared. Within 90-day subsequent to the time of plugging and abandonment of the entire site, superfluous debris and equipment shall be removed from the site.   |
| Drilling/Completion Operations | Green Completions – No hydrocarbons will be produced from this well – NA.  |
| Odor mitigation                | Per Rule 805: Oil & gas facilities and equipment shall be operated in such a manner that odors and dust do not constitute a nuisance or hazard to public welfare.  |
| Drilling/Completion Operations | Closed Loop Drilling Systems – Pit Restrictions. Not applicable; a closed-loop system will be used for drilling.   |
| Drilling/Completion Operations | Drill stem tests. Not applicable; no Drill Stem tests are planned.   |
| General Housekeeping           | Fencing requirements. A permanent fencing plan will be reviewed by the surface owner, & the applicant.   |

Inspector Name: Peterson, Tom

|                   |   |
|-------------------|---|
| Noise mitigation  | Lighting abatement measures shall be implemented, including the installation of lighting shield devices on all of the more conspicuous lights, low density sodium lighting where practicable; and rig shrouding will be used as well as sound walls on the north side during drilling and completion activities to provide noise relief, as the nearest building unit is just over 500' to the north. Permanent equipment on location shall be muffled to reduce noise, or shall be appropriately buffered. |
| Final Reclamation | P&A'd wells shall be identified pursuant to 319.a.(5).  |

**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: 278316 Type: WELL API Number: 123-23038 Status: IJ Insp. Status: AC

**Underground Injection Control**

UIC Violation: \_\_\_\_\_ Maximum Injection Pressure: \_\_\_\_\_

UIC Routine

Inj./Tube: Pressure or inches of Hg 200# psig Previous Test Pressure \_\_\_\_\_ MPP \_\_\_\_\_  
(e.g. 30 psig or -30" Hg) Inj Zone: LYNS

TC: Pressure or inches of Hg 0# psig Previous Test Pressure \_\_\_\_\_ Last MIT: 09/18/2013

Brhd: Pressure or inches of Hg 0# psig Previous Test Pressure \_\_\_\_\_ AnnMTReq: \_\_\_\_\_

Comment: \_\_\_\_\_

Method of Injection: PUMP FEED

Test Type: \_\_\_\_\_ Tbg psi: \_\_\_\_\_ Csg psi: \_\_\_\_\_ BH psi: \_\_\_\_\_

Insp. Status: \_\_\_\_\_

Comment: \_\_\_\_\_

**BradenHead**

Comment: Bradenhead is exposed at surface.

CA:

CA Date:

Facility ID: 439321 Type: WELL API Number: 123-40377 Status: IJ Insp. Status: AC

**Underground Injection Control**

UIC Violation: \_\_\_\_\_

Maximum Injection Pressure: \_\_\_\_\_

**UIC Routine**Inj./Tube: Pressure or inches of Hg 814# psig Previous Test Pressure \_\_\_\_\_ MPP \_\_\_\_\_  
(e.g. 30 psig or -30" Hg) Inj Zone: LYNS

TC: Pressure or inches of Hg 0# psig Previous Test Pressure \_\_\_\_\_ Last MIT: 01/02/2015

Brhd: Pressure or inches of Hg 0# psig Previous Test Pressure \_\_\_\_\_ AnnMTReq: \_\_\_\_\_

Comment: \_\_\_\_\_

Method of Injection: PUMP FEED

Test Type: \_\_\_\_\_ Tbg psi: \_\_\_\_\_ Csg psi: \_\_\_\_\_ BH psi: \_\_\_\_\_

Insp. Status: \_\_\_\_\_

Comment: \_\_\_\_\_

**BradenHead**

Comment: Bradenhead is exposed at surface.

CA:

CA Date:

**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:**

Inspector Name: Peterson, Tom

Date Interim Reclamation Started: \_\_\_\_\_ Date Interim Reclamation Completed: \_\_\_\_\_

Land Use: DRY LAND

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: DRY LAND

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 \_\_\_\_\_

Inspector Name: Peterson, Tom

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            | Gravel                  | Pass                  |               |                          |         |

S/A/V: SATISFACTOR  
Y \_\_\_\_\_

Corrective Date: \_\_\_\_\_

Comment:

CA:

**Pits:** ☐ NO SURFACE INDICATION OF PIT