

**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:

06/27/2016

Document Number:

673403304

Overall Inspection:

**ACTION REQUIRED****FIELD INSPECTION FORM**

|                     |             |        |                 |                          |             |
|---------------------|-------------|--------|-----------------|--------------------------|-------------|
| Location Identifier | Facility ID | Loc ID | Inspector Name: | On-Site Inspection       | 2A Doc Num: |
|                     | 223154      | 312980 | Waldron, Emily  | <input type="checkbox"/> |             |

**Operator Information:**OGCC Operator Number: 10407Name of Operator: ANTLER ENERGY LLCAddress: PO BOX 104City: BAGGS State: WY Zip: 82321

- ☒ 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 |
|--------------|-------|-------------------------|---------|
| Evans, Clay  |       | antlerenergy@yahoo.com  |         |
| Neidel, Kris |       | kris.neidel@state.co.us |         |

**Compliance Summary:**QtrQtr: NESE Sec: 20 Twp: 11N Range: 97W

| Insp. Date | Doc Num   | Insp. Type | Insp Status | Satisfactory /Action Required | PA P/F/I | Pas/Fail (P/F) | Violation (Y/N) |
|------------|-----------|------------|-------------|-------------------------------|----------|----------------|-----------------|
| 11/17/2015 | 673402664 | PR         | PR          | <b>ACTION REQUIRED</b>        |          |                | No              |
| 01/27/2015 | 673401752 | PR         | PR          | SATISFACTORY                  |          |                | No              |
| 02/24/2014 | 673400286 | PR         | SI          | <b>ACTION REQUIRED</b>        |          |                | No              |
| 03/20/2012 | 662300336 | PR         | SI          | <b>ACTION REQUIRED</b>        |          |                | No              |
| 04/18/2011 | 200307994 | PR         | PR          | <b>ACTION REQUIRED</b>        |          |                | Yes             |

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

| Facility ID | Type | Status | Status Date | Well Class | API Num   | Facility Name      | Insp Status |                                     |
|-------------|------|--------|-------------|------------|-----------|--------------------|-------------|-------------------------------------|
| 223154      | WELL | PR     | 08/13/1996  | OW         | 081-06516 | AMOCO-FEDERAL 20-9 | PR          | <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**

|                    |                              |         |                   |      |
|--------------------|------------------------------|---------|-------------------|------|
| <b>Lease Road:</b> |                              |         |                   |      |
| Type               | Satisfactory/Action Required | comment | Corrective Action | Date |
|                    |                              |         |                   |      |

|                      |                              |  |                                       |            |
|----------------------|------------------------------|--|---------------------------------------|------------|
| <b>Signs/Marker:</b> |                              |  |                                       |            |
| Type                 | Satisfactory/Action Required | Comment                                  | Corrective Action                     | CA Date    |
| TANK LABELS/PLACARDS | ACTION REQUIRED              | Tank label on western tank is illegible. | Install sign to comply with rule 210. | 07/28/2016 |
| WELLHEAD             | ACTION REQUIRED              | Previous operator on wellhead sign.      | Install sign to comply with rule 210. | 12/17/2015 |
| BATTERY              | SATISFACTORY                 | At entrance.                             |                                       |            |

Emergency Contact Number (S/AR): SATISFACTORY

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

Comment: 307-380-7616

Corrective Action: \_\_\_\_\_

|                           |                              |  |  |            |
|---------------------------|------------------------------|--|--|------------|
| <b>Good Housekeeping:</b> |                              |  |  |            |
| Type                      | Satisfactory/Action Required | Comment  | Corrective Action  | CA Date    |
| STORAGE OF SUPL           | ACTION REQUIRED              | Tubing and pumpjack base on east side of location. | Comply with Rule 603.f using the Rule 603.f guidance document for further details. | 12/17/2015 |
| WEEDS                     | ACTION REQUIRED              | Annual weeds on location.                          | Comply with Rule 603.f using the Rule 603.f guidance document for further details. | 12/17/2015 |

|                |      |        |                   |         |
|----------------|------|--------|-------------------|---------|
| <b>Spills:</b> |      |        |                   |         |
| Type           | Area | Volume | Corrective action | CA Date |

☐ Multiple Spills and Releases?

|                  |                              |         |                   |         |
|------------------|------------------------------|---------|-------------------|---------|
| <b>Fencing/:</b> |                              |         |                   |         |
| Type             | Satisfactory/Action Required | Comment | Corrective Action | CA Date |
| PIT              | SATISFACTORY                 |         |                   |         |

|                                 |  |                               |              |                 |
|---------------------------------|--|-------------------------------|--------------|-----------------|
| <b>Equipment:</b>               |  |                               |              |                 |
| Type: Bird Protectors           | #  | Satisfactory/Action Required: | SATISFACTORY |                 |
| Comment                         |  |                               |              |                 |
| Corrective Action               |  |                               |              | Date:           |
| Type: Pump Jack                 | # 1  | Satisfactory/Action Required: | SATISFACTORY |                 |
| Comment                         | Paraffin at wellhead. Weeds around wellhead.                               |                               |              |                 |
| Corrective Action               |  |                               |              | Date:           |
| Type: Horizontal Heater Treater | # 1  | Satisfactory/Action Required: | SATISFACTORY |                 |
| Comment                         | Approximately 20 feet from heated crude tanks.                             |                               |              |                 |
| Corrective Action               | Move equipment to comply with minimum 50 foot setback as per Rule 605.a.6. |                               |              | Date: 7/28/2016 |
| Type: Dehydrator                | # 1  | Satisfactory/Action Required: | SATISFACTORY |                 |
| Comment                         |  |                               |              |                 |

Inspector Name: Waldron, Emily

|                                    |     |                               |  |              |
|------------------------------------|-----|-------------------------------|--|--------------|
| Corrective Action                  |     |                               |  | Date:        |
| Type: Horizontal Heater<br>Treater | # 1 | Satisfactory/Action Required: |  | SATISFACTORY |
| Comment                            |     |                               |  |              |
| Corrective Action                  |     |                               |  | Date:        |

**Facilities:** ☐ New Tank Tank ID: \_\_\_\_\_

| Contents  | # | Capacity | Type             | SE GPS                |
|-----------|---|----------|------------------|-----------------------|
| CRUDE OIL | 2 | 400 BBLS | HEATED STEEL AST | 40.896100,-108.308620 |

|                    |              |          |  |                  |
|--------------------|--------------|----------|--|------------------|
| 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 |
|-------|----------|---------------------|---------------------|-------------|
| Earth | Adequate |                     |                     | 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: 223154

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: 223154 Type: WELL API Number: 081-06516 Status: PR Insp. Status: PR

**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 \_\_\_\_\_

Inspector Name: Waldron, Emily

**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:**

Inspector Name: Waldron, Emily

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

Y

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

CA: \_\_\_\_\_

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

Pit Type: \_\_\_\_\_ Lined: \_\_\_\_\_ Pit ID: \_\_\_\_\_ Lat: 40.896060 Long: -108.308650

**Lining:**

Liner Type: \_\_\_\_\_ Liner Condition: \_\_\_\_\_

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

**Fencing:**

Fencing Type: \_\_\_\_\_ Fencing Condition: \_\_\_\_\_

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

**Netting:**

Netting Type: \_\_\_\_\_ Netting Condition: \_\_\_\_\_

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

Anchor Trench Present: \_\_\_\_\_ Oil Accumulation: \_\_\_\_\_ 2+ feet Freeboard: \_\_\_\_\_

Pit (S/A/V): **ACTION** Comment: \_\_\_\_\_

Corrective Action: Please work with COGCC environmental staff Kris Neidel kris.neidel@state.co.us 970-871-1963 to close pit if not in use or properly permit pit if in use. Date: **12/17/2015**

**COGCC Comments**

| Comment   | User     | Date       |
|---|----------|------------|
| Follow up to inspection from 11/17/2015 document number 673402664. All corrective actions remain outstanding. | waldrone | 06/28/2016 |

**Attached Documents**

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

| Document Num | Description         | URL   |
|--------------|---------------------|---|
| 673403304    | INSPECTION APPROVED | <a href="http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3889643">http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3889643</a> |
| 673403314    | Inspection Photos   | <a href="http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3889636">http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3889636</a> |