

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:
06/29/2016
Document Number:
666802315
Overall Inspection:
SATISFACTORY

FIELD INSPECTION FORM

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	<u>289037</u>	<u>311676</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

Compliance Summary:

QtrQtr:	Sec:	Twp:	Range:
<u>SWSE</u>	<u>18</u>	<u>6S</u>	<u>92W</u>

Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Action Required	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
07/20/2015	666801158	XX	XX	ACTION REQUIRED		Fail	No
01/27/2012	661400052	AL	AL	SATISFACTORY			No
12/09/2010	200286853	ER	ND	SATISFACTORY			No
12/09/2010	200295560	ER	ND	SATISFACTORY			No
07/08/2007	200119133	DG	ND	SATISFACTORY			No

Inspector Comment:

Inspection does not address Action required items noted in previous inspection for wells with the status of Abandoned Locations

Related Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status	
284376	WELL	PR	03/11/2007	GW	045-12159	DEVER A3	PR	<input checked="" type="checkbox"/>
284377	WELL	PR	08/23/2011	GW	045-12158	DEVER A2	PR	<input checked="" type="checkbox"/>
284378	WELL	PR	11/22/2006	GW	045-12157	DEVER A1	PR	<input checked="" type="checkbox"/>
284379	WELL	AL	01/02/2014	LO	045-12156	DEV ER A17	AL	<input checked="" type="checkbox"/>
288800	WELL	AL	01/02/2014	LO	045-13572	DEVER A11	AL	<input checked="" type="checkbox"/>
288802	WELL	AL	01/02/2014	LO	045-13570	DEVER A7	AL	<input checked="" type="checkbox"/>
288803	WELL	PR	04/05/2008	GW	045-13571	DEVER A12	PR	<input checked="" type="checkbox"/>

289034	WELL	PR	11/20/2007	GW	045-13635	DEVER A9	PR	<input checked="" type="checkbox"/>
289035	WELL	PR	11/20/2007	GW	045-13634	DEVER A8	PR	<input checked="" type="checkbox"/>
289036	WELL	PR	01/23/2009	GW	045-13633	DEVER A6	PR	<input checked="" type="checkbox"/>
289037	WELL	AL	08/01/2012	LO	045-13632	Dever A5	AL	<input checked="" type="checkbox"/>
289038	WELL	AL	08/01/2012	LO	045-13631	Dever A14	AL	<input checked="" type="checkbox"/>
289039	WELL	PR	01/22/2007	GW	045-13630	DEVER A13	PR	<input checked="" type="checkbox"/>
289040	WELL	PR	01/26/2009	GW	045-13629	DEVER A10	PR	<input checked="" type="checkbox"/>
292451	WELL	AL	12/29/2011	LO	045-14723	DEVER A15	AL	<input checked="" type="checkbox"/>
294072	WELL	PR	12/24/2007	GW	045-15232	DEVER A16	PR	<input checked="" type="checkbox"/>
294322	WELL	AL	01/02/2014	LO	045-15376	DEVER A18	AL	<input checked="" type="checkbox"/>
295547	PIT	CL	08/02/2013		-	DEVER A PAD	CL	<input 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
BATTERY	SATISFACTORY	AIRS ID 045-1427-001		
WELLHEAD	SATISFACTORY			
TANK LABELS/PLACARDS	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
<input type="checkbox"/> Multiple Spills and Releases?				

Fencing/:				
Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date

Equipment:					
Type: Plunger Lift	# 10	Satisfactory/Action Required:	SATISFACTORY		
Comment					
Corrective Action				Date:	
Type: Emission Control Device	# 1	Satisfactory/Action Required:	SATISFACTORY		
Comment					
Corrective Action				Date:	
Type: Horizontal Heated Separator	# 12	Satisfactory/Action Required:	SATISFACTORY		
Comment					
Corrective Action				Date:	

Facilities:					
<input type="checkbox"/> New Tank		Tank ID: _____			
Contents	#	Capacity	Type	SE GPS	
PRODUCED WATER	1	300 BBLS	STEEL AST	39.521626,-107.709061	
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	
Metal	Adequate	Walls Sufficient	Base Sufficient	Adequate	
Corrective Action				Corrective Date	
Comment					

Facilities:				
<input type="checkbox"/> New Tank		Tank ID: _____		
Contents	#	Capacity	Type	SE GPS
CONDENSATE	3	300 BBLS	STEEL AST	
S/AR	SATISFACTORY		Comment: Centralized battery	

Corrective Action:	Corrective Date:			
Paint				
Condition	Adequate			
Other (Content)	_____			
Other (Capacity)	_____			
Other (Type)	_____			
Berms				
Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Corrective Action				Corrective Date
Comment				

Venting:	
Yes/No	NO
Comment	

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

Predrill

Location ID: 289037

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: 284376 Type: WELL API Number: 045-12159 Status: PR Insp. Status: PR

Producing Well

Comment: Plunger lift

Facility ID: 284377 Type: WELL API Number: 045-12158 Status: PR Insp. Status: PR

Producing Well

Comment: Plunger lift

Facility ID: 284378 Type: WELL API Number: 045-12157 Status: PR Insp. Status: PR

Producing Well

Comment: Plunger lift

Facility ID: 284379 Type: WELL API Number: 045-12156 Status: AL Insp. Status: AL

Idle Well

Purpose: Shut In Temporarily Abandoned Reminder: _____
S/A/V: _____ CA Date: _____
CA: _____
Comment: **No visl sign of well**

Facility ID: 288800 Type: WELL API Number: 045-13572 Status: AL Insp. Status: AL

Idle Well

Purpose: Shut In Temporarily Abandoned Reminder: _____
S/A/V: _____ CA Date: _____
CA: _____
Comment: **No visl sign of well**

Facility ID: 288802 Type: WELL API Number: 045-13570 Status: AL Insp. Status: AL

Idle Well

Purpose: Shut In Temporarily Abandoned Reminder: _____
S/A/V: _____ CA Date: _____
CA: _____
Comment: **Conductor pipe set**

Facility ID: 288803 Type: WELL API Number: 045-13571 Status: PR Insp. Status: PR

Producing Well

Comment: **Plunger lift**

Facility ID: 289034 Type: WELL API Number: 045-13635 Status: PR Insp. Status: PR

Producing Well

Comment: **Plunger lift**

Facility ID: 289035 Type: WELL API Number: 045-13634 Status: PR Insp. Status: PR

Producing Well

Comment: **Plunger lift**

Facility ID: 289036 Type: WELL API Number: 045-13633 Status: PR Insp. Status: PR

Producing Well

Comment: **Plunger lift**

Facility ID: 289037 Type: WELL API Number: 045-13632 Status: AL Insp. Status: AL

Idle Well

Purpose: Shut In Temporarily Abandoned Reminder: _____
S/A/V: _____ CA Date: _____
CA: _____
Comment: **Conductor pipe set**

Facility ID: 289038 Type: WELL API Number: 045-13631 Status: AL Insp. Status: AL

Idle Well

Purpose: Shut In Temporarily Abandoned Reminder: _____
S/A/V: _____ CA Date: _____
CA: _____
Comment: **No visual sign of well**

Facility ID: 289039 Type: WELL API Number: 045-13630 Status: PR Insp. Status: PR

Producing Well

Comment: **Plunger lift**

Facility ID: 289040 Type: WELL API Number: 045-13629 Status: PR Insp. Status: PR

Producing Well

Comment: **Plunger lift**

Facility ID: 292451 Type: WELL API Number: 045-14723 Status: AL Insp. Status: AL

Idle Well

Purpose: Shut In Temporarily Abandoned Reminder: _____
S/A/V: _____ CA Date: _____
CA: _____
Comment: **Conductor pipe set**

Facility ID: 294072 Type: WELL API Number: 045-15232 Status: PR Insp. Status: PR

Producing Well

Comment: **Plunger lift**

Facility ID: 294322 Type: WELL API Number: 045-15376 Status: AL Insp. Status: AL

Idle Well

Purpose: Shut In Temporarily Abandoned Reminder: _____
S/A/V: _____ CA Date: _____
CA: _____
Comment: **Conductor pipe set**

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): Y

Comment: _____

Pilot: ON Wildlife Protection Devices (fired vessels): YES

Reclamation - Storm Water - Pit

Interim Reclamation:

Date Interim Reclamation Started: _____ Date Interim Reclamation Completed: _____

Land Use: _____

Comment:

1003a. Waste and Debris removed? Pass

CM _____

CA _____ CA Date _____

Unused or unneeded equipment onsite? Pass

CM _____

CA _____ CA Date _____

Pit, cellars, rat holes and other bores closed? Pass

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: _____

Inspector Name: Murray, Richard

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
		Ditches	Pass			
Drains	Pass					
Seeding						
Berms	Pass					
Gravel	Pass					
		Gravel	Pass			

S/A/V: SATISFACTOR Corrective Date: _____
 Y _____

Comment:

CA:

Pits: NO SURFACE INDICATION OF PIT

Attached Documents

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

Document Num	Description	URL
666802315	INSPECTION APPROVED	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3890577