

**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:

08/09/2016

Document Number:

666802472

Overall Inspection:

SATISFACTORY**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	417851	417787	Murray, Richard	<input type="checkbox"/>	

Operator Information:OGCC Operator Number: 10531Name of Operator: VANGUARD OPERATING LLCAddress: 5847 SAN FELIPE #3000City: HOUSTON State: TX Zip: 77057

- ☐ 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
Ghan, Scott		sghan@vnrlc.com	Sr. EH&S
Axelsson, Aaron	970-230-0926	aaxelson@vnrlc.com	Sr. Production Foreman

Compliance Summary:QtrQtr: NWSE Sec: 29 Twp: 6S Range: 91W**Inspector Comment:****Related Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status	
211306	WELL	PR	04/17/2005	GW	045-07065	GIBSON GULCH UNIT 10-29	PR	<input checked="" type="checkbox"/>
211308	WELL	PR	03/09/2005	GW	045-07067	GIBSON GULCH UNIT 14-29	PR	<input checked="" type="checkbox"/>
211309	WELL	PR	10/29/2003	GW	045-07068	GIBSON GULCH UNIT 15-29	PR	<input checked="" type="checkbox"/>
417801	WELL	PR	03/29/2011	GW	045-19618	GGU Federal 43A-29-691	PR	<input checked="" type="checkbox"/>
417802	WELL	PR	03/30/2011	GW	045-19619	GGU Swanson 33C-29-691	PR	<input checked="" type="checkbox"/>
417803	WELL	PR	03/29/2011	GW	045-19620	GGU Federal 42A-29-691	PR	<input checked="" type="checkbox"/>
417804	WELL	PR	10/01/2014	GW	045-19621	GGU Swanson 32A-29-691	PR	<input checked="" type="checkbox"/>
417805	WELL	PR	04/19/2011	GW	045-19622	GGU Federal 44D-29-691	PR	<input checked="" type="checkbox"/>
417806	WELL	PR	04/19/2011	GW	045-19623	GGU Swanson 33A-29-691	PR	<input checked="" type="checkbox"/>
417807	WELL	PR	04/01/2011	GW	045-19624	GGU Federal 43C-29-691	PR	<input checked="" type="checkbox"/>
417808	WELL	PR	03/30/2011	GW	045-19625	GGU Swanson 32B-29-691	PR	<input checked="" type="checkbox"/>

Inspector Name: Murray, Richard

417809	WELL	PR	03/10/2011	GW	045-19626	GGU Federal 42B-29-691	PR	✗
417810	WELL	PR	04/01/2011	GW	045-19627	GGU Federal 34B-29-691	PR	✗
417811	WELL	PR	03/29/2011	GW	045-19628	GGU Federal 43B-29-691	PR	✗
417813	WELL	PR	04/01/2011	GW	045-19629	GGU Federal 34D-29-691	PR	✗
417851	WELL	PR	03/30/2011	GW	045-19643	GGU Swanson 33D-29-691	PR	✗
418277	WELL	PR	02/10/2011	GW	045-19685	GGU Federal 43D-29-691	PR	✗

Equipment:Location Inventory

Special Purpose Pits: _____	Drilling Pits: <u>1</u>	Wells: <u>17</u>	Production Pits: _____
Condensate Tanks: <u>8</u>	Water Tanks: <u>6</u>	Separators: <u>17</u>	Electric Motors: _____
Gas or Diesel Mortors: _____	Cavity Pumps: _____	LACT Unit: _____	Pump Jacks: _____
Electric Generators: _____	Gas Pipeline: <u>1</u>	Oil Pipeline: <u>1</u>	Water Pipeline: <u>1</u>
Gas Compressors: _____	VOC Combustor: <u>2</u>	Oil Tanks: _____	Dehydrator Units: _____
Multi-Well Pits: _____	Pigging Station: _____	Flare: _____	Fuel Tanks: _____

Location**Signs/Marker:**

Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
BATTERY	SATISFACTORY			
CONTAINERS	SATISFACTORY			

Emergency Contact Number (S/AR): SATISFACTORY

Corrective Date: _____

Comment: _____

Corrective Action: _____

Spills:

Type	Area	Volume	Corrective action	CA Date
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☐ Multiple Spills and Releases?**Equipment:**

Type: Gas Meter Run	# 0	Satisfactory/Action Required:	SATISFACTORY
Comment			
Corrective Action			Date:
Type: Plunger Lift	# 17	Satisfactory/Action Required:	SATISFACTORY
Comment			
Corrective Action			Date:
Type: Dehydrator	# 0	Satisfactory/Action Required:	SATISFACTORY
Comment			
Corrective Action			Date:
Type: Pig Station	# 1	Satisfactory/Action Required:	SATISFACTORY
Comment			

Inspector Name: Murray, Richard

Corrective Action		Date:
Type: Emission Control Device	# 1	Satisfactory/Action Required: SATISFACTORY
Comment		
Corrective Action		Date:
Type: Horizontal Heated Separator	# 17	Satisfactory/Action Required: SATISFACTORY
Comment		
Corrective Action		Date:
Type: Ancillary equipment	# 5	Satisfactory/Action Required: SATISFACTORY
Comment: Chemical units at wellhead		
Corrective Action		Date:

Tanks and Berms:☐ New Tank

Tank ID: _____

Contents	#	Capacity	Type	SE GPS
CONDENSATE	8	500 BBLS	STEEL AST	39.496395,-107.575431
S/AR	SATISFACTORY		Comment:	
Corrective Action:				Corrective Date:

Paint

Condition	Adequate
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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				

Venting:

Yes/No	YES
Comment	Bradenhead valves open

Flaring:

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

Predrill

Location ID: 417851

Lease Road Adeq.: _____ Pads: _____ Soil Stockpile: _____

S/AR: _____

Corrective Action: _____ Date: _____ CDP Num.: _____

Form 2A COAs:

Inspector Name: Murray, Richard

Group	User	Comment	Date
Agency	kubeczkod	Reserve pit must be lined or closed loop system must be implemented during drilling.	06/16/2010
Agency	kubeczkod	Operator must ensure 110 percent secondary containment for any volume of fluids contained at well site during drilling and completion operations. If fluids are conveyed via pipeline, operator must implement best management practices to contain any unintentional release of fluids.	06/16/2010
Agency	kubeczkod	Location is in a sensitive area because of proximity to surface water; therefore, operator must ensure 110 percent secondary containment for any volume of fluids contained at well site during drilling and completion operations.	06/16/2010
Agency	kubeczkod	Operator must implement best management practices to contain any unintentional release of fluids.	06/16/2010
Agency	yokleyb	The moisture content of any drill cuttings in a cuttings pit, trench, or pile shall be as low as practicable to prevent accumulation of liquids greater than de minimis amounts. At the time of closure, the drill cuttings must also meet the applicable standards of table 910-1.	06/07/2010

S/AR: SATISFACTORY

Comment:

No drilling or completions being performed at time of inspection, No visal sign of pits or cuttings

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:	211306	Type:	WELL	API Number:	045-07065	Status:	PR	Insp. Status:	PR
Producing Well									
Comment:	Plunger lift								
Facility ID:	211308	Type:	WELL	API Number:	045-07067	Status:	PR	Insp. Status:	PR
Producing Well									
Comment:	Plunger lift								
Facility ID:	211309	Type:	WELL	API Number:	045-07068	Status:	PR	Insp. Status:	PR
Producing Well									
Comment:	Plunger lift								
Facility ID:	417801	Type:	WELL	API Number:	045-19618	Status:	PR	Insp. Status:	PR
Producing Well									
Comment:	Plunger lift								
Facility ID:	417802	Type:	WELL	API Number:	045-19619	Status:	PR	Insp. Status:	PR
Producing Well									
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Facility ID:	417803	Type:	WELL	API Number:	045-19620	Status:	PR	Insp. Status:	PR
Producing Well									
Comment:	Plunger lift								
Facility ID:	417804	Type:	WELL	API Number:	045-19621	Status:	PR	Insp. Status:	PR
Producing Well									
Comment:	Plunger lift								
Facility ID:	417805	Type:	WELL	API Number:	045-19622	Status:	PR	Insp. Status:	PR
Producing Well									
Comment:	Plunger lift								
Facility ID:	417806	Type:	WELL	API Number:	045-19623	Status:	PR	Insp. Status:	PR
Producing Well									
Comment:	Plunger lift								
Facility ID:	417807	Type:	WELL	API Number:	045-19624	Status:	PR	Insp. Status:	PR
Producing Well									
Comment:	Plunger lift								
Facility ID:	417808	Type:	WELL	API Number:	045-19625	Status:	PR	Insp. Status:	PR
Producing Well									
Comment:	Plunger lift								
Facility ID:	417809	Type:	WELL	API Number:	045-19626	Status:	PR	Insp. Status:	PR

Producing WellComment: **Plunger lift**Facility ID: 417810 Type: WELL API Number: 045-19627 Status: PR Insp. Status: PR**Producing Well**Comment: **Plunger lift**Facility ID: 417811 Type: WELL API Number: 045-19628 Status: PR Insp. Status: PR**Producing Well**Comment: **Plunger lift**Facility ID: 417813 Type: WELL API Number: 045-19629 Status: PR Insp. Status: PR**Producing Well**Comment: **Plunger lift**Facility ID: 417851 Type: WELL API Number: 045-19643 Status: PR Insp. Status: PR**Producing Well**Comment: **Plunger lift**Facility ID: 418277 Type: WELL API Number: 045-19685 Status: PR Insp. Status: PR**Producing Well**Comment: **Plunger lift****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: _____

Inspector Name: Murray, Richard

Land Use: RANGELAND

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: RANGELAND

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: Murray, Richard

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			
Waddles	Pass					
		Check Dams	Pass			
Sediment Traps	Pass					
Rip Rap	Pass					
		Culverts	Pass			
		Sediment Traps	Pass			
Seeding	Pass					
		Rip Rap	Pass			

S/A/V: SATISFACTORY Corrective Date: _____

Comment: _____

CA: _____

Pits: ☒ NO SURFACE INDICATION OF PIT