

**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:  
08/10/2016  
Document Number:  
666802474  
Overall Inspection:  
SATISFACTORY

**FIELD INSPECTION FORM**

|                     |               |               |                        |                          |             |
|---------------------|---------------|---------------|------------------------|--------------------------|-------------|
| Location Identifier | Facility ID   | Loc ID        | Inspector Name:        | On-Site Inspection       | 2A Doc Num: |
|                     | <u>280247</u> | <u>334694</u> | <u>Murray, Richard</u> | <input type="checkbox"/> |             |

**Operator Information:**

|                       |   |
|-----------------------|---|
| OGCC Operator Number: | <u>10531</u>                                      |
| Name of Operator:     | <u>VANGUARD OPERATING LLC</u>                     |
| Address:              | <u>5847 SAN FELIPE #3000</u>                      |
| City:                 | <u>HOUSTON</u> State: <u>TX</u> Zip: <u>77057</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                |
|----------------|--------------|--------------------|------------------------|
| Ghan, Scott    |              | sghan@vnrlc.com    | Sr. EH&S               |
| Axelson, Aaron | 970-230-0926 | aaxelson@vnrlc.com | Sr. Production Foreman |

**Compliance Summary:**

|         |             |      |           |      |           |        |            |
|---------|-------------|------|-----------|------|-----------|--------|------------|
| QtrQtr: | <u>SESW</u> | Sec: | <u>33</u> | Twp: | <u>6S</u> | Range: | <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) |
|------------|-----------|------------|-------------|-------------------------------|------------|----------------|-----------------|
| 01/26/2015 | 666800543 | PR         | PR          | SATISFACTORY                  |            |                | No              |
| 07/01/2013 | 670200616 | PR         | PR          | SATISFACTORY                  |            |                | No              |
| 06/04/2007 | 200113667 | PR         | PR          | SATISFACTORY                  | In Process | Pass           | No              |

**Inspector Comment:**

Facilities on location ID 323945

**Related Facilities:**

| Facility ID | Type | Status | Status Date | Well Class | API Num   | Facility Name              | Insp Status |                                     |
|-------------|------|--------|-------------|------------|-----------|----------------------------|-------------|-------------------------------------|
| 259900      | WELL | PR     | 09/01/2004  | GW         | 045-07795 | MAMM CREEK FEDERAL 11-33   | PR          | <input checked="" type="checkbox"/> |
| 259933      | WELL | PR     | 10/04/2001  | GW         | 045-07802 | MAMM CREEK FEDERAL 14-33   | PR          | <input checked="" type="checkbox"/> |
| 280247      | WELL | PR     | 09/16/2006  | GW         | 045-11224 | OKAGAWA FEDERAL 14C-33-692 | PR          | <input checked="" type="checkbox"/> |
| 280257      | WELL | PR     | 09/15/2006  | GW         | 045-11227 | OKAGAWA FEDERAL 24B-33-692 | PR          | <input checked="" type="checkbox"/> |
| 280258      | WELL | PR     | 09/16/2006  | GW         | 045-11226 | OKAGAWA FEDERAL 23A-33-692 | PR          | <input checked="" type="checkbox"/> |

**Equipment:**

Location Inventory

|  |
|--|
|  |
|--|

Inspector Name: Murray, Richard

|                              |                        |                     |                         |
|------------------------------|------------------------|---------------------|-------------------------|
| 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**

**Signs/Marker:**

| Type     | Satisfactory/Action Required | Comment | Corrective Action | CA Date |
|----------|------------------------------|---------|-------------------|---------|
| WELLHEAD | SATISFACTORY                 |         |                   |         |

Emergency Contact Number (S/AR): SATISFACTORY Corrective Date: \_\_\_\_\_

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

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

**Spills:**

| Type | Area | Volume | Corrective action | CA Date |
|------|------|--------|-------------------|---------|
|------|------|--------|-------------------|---------|

Multiple Spills and Releases?

**Equipment:**

Type: Plunger Lift # 5 Satisfactory/Action Required: SATISFACTORY

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

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

**Tanks and Berms:**

New Tank Tank ID: \_\_\_\_\_

| Contents           | #            | Capacity | Type           | SE GPS                 |
|--------------------|--------------|----------|----------------|------------------------|
| CONDENSATE         | 1            | 200 BBLS | STEEL AST      | 39.479007,-107.675579  |
| 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 | Walls Sufficient    | Base Sufficient     | Adequate               |
| Corrective Action | _____    |                     |                     | Corrective Date: _____ |
| Comment           | _____    |                     |                     |                        |

**Venting:**

Yes/No **NO**

Comment **Bradenhead valves open**

**Flaring:**

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

**Predrill**

Location ID: 280247

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: 259900 Type: WELL API Number: 045-07795 Status: PR Insp. Status: PR

**Producing Well**

Comment: Plunger lift

Facility ID: 259933 Type: WELL API Number: 045-07802 Status: PR Insp. Status: PR

**Producing Well**

Comment: Plunger lift

Facility ID: 280247 Type: WELL API Number: 045-11224 Status: PR Insp. Status: PR

**Producing Well**

Comment: **Plunger lift**

Facility ID: 280257 Type: WELL API Number: 045-11227 Status: PR Insp. Status: PR

**Producing Well**

Comment: **Plunger lift, Bradenhead hooked up to 200 bbls tank**

Facility ID: 280258 Type: WELL API Number: 045-11226 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): N

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? Pass  
CM \_\_\_\_\_  
CA \_\_\_\_\_ CA Date \_\_\_\_\_  
Unused or unneeded equipment onsite? Pass  
CM \_\_\_\_\_  
CA \_\_\_\_\_ CA Date \_\_\_\_\_  
Pit, cellars, rat holes and other bores closed? Pass

Inspector Name: Murray, Richard

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: \_\_\_\_\_

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 |
|------------------|-----------------|-------------------------|-----------------------|---------------|--------------------------|---------|
|                  |                 | Gravel                  | Pass                  |               |                          |         |
|                  |                 | Culverts                | Pass                  |               |                          |         |

Inspector Name: Murray, Richard

|         |      |         |      |  |  |
|---------|------|---------|------|--|--|
| Gravel  | Pass |         |      |  |  |
| Seeding | Pass |         |      |  |  |
|         |      | Ditches | Pass |  |  |

S/A/V: SATISFACTORY Corrective Date: \_\_\_\_\_

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   |
|--------------|---------------------|---|
| 666802474    | INSPECTION APPROVED | <a href="http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3925009">http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3925009</a> |