

**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:

666802469

Overall Inspection:

SATISFACTORY**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	417088	417085	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
Axelson, Aaron	970-230-0926	aaxelson@vnrlc.com	Sr. Production Foreman
Ghan, Scott		sghan@vnrlc.com	Sr. EH&S

Compliance Summary:QtrQtr: SENV Sec: 32 Twp: 6S Range: 91W

Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Action Required	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
03/17/2011	200307029	PR	PR	SATISFACTORY			No

Inspector Comment:**Related Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status	
417063	WELL	PR	12/16/2010	GW	045-19450	GGU Barge Federal 32A-32-691	PR	<input checked="" type="checkbox"/>
417068	WELL	PR	12/16/2010	GW	045-19451	GGU Barge Federal 32C-32-691	PR	<input checked="" type="checkbox"/>
417077	WELL	PR	01/11/2011	GW	045-19452	GGU Barge 22D-32-691	PR	<input checked="" type="checkbox"/>
417086	WELL	PR	01/11/2011	GW	045-19453	GGU Barge Federal 32D-32-691	PR	<input checked="" type="checkbox"/>
417088	WELL	PR	12/16/2010	GW	045-19454	GGU Barge 22A-32-691	PR	<input checked="" type="checkbox"/>
417089	WELL	PR	12/16/2010	GW	045-19455	GGU Barge Federal 32B-32-691	PR	<input checked="" type="checkbox"/>
417094	WELL	PR	12/16/2010	GW	045-19456	GGU Barge Federal 33D-32-691	PR	<input checked="" type="checkbox"/>
417095	WELL	PR	01/11/2011	GW	045-19457	GGU Barge 22B-32-691	PR	<input checked="" type="checkbox"/>
417099	WELL	PR	01/11/2011	GW	045-19458	GGU Barge 22C-32-691	PR	<input checked="" type="checkbox"/>

Equipment:**Location Inventory**

Inspector Name: Murray, Richard

Special Purpose Pits: _____	Drilling Pits: <u>1</u>	Wells: <u>9</u>	Production Pits: _____
Condensate Tanks: <u>6</u>	Water Tanks: <u>4</u>	Separators: <u>9</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: <u>1</u>	Pigging Station: _____	Flare: _____	Fuel Tanks: _____

Location

<u>Signs/Marker:</u>				
Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
BATTERY	SATISFACTORY	AIRS ID 045-2127-001		

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

Comment: _____

Corrective Action: _____

<u>Spills:</u>				
Type	Area	Volume	Corrective action	CA Date
<input type="checkbox"/> Multiple Spills and Releases?				

<u>Equipment:</u>				
Type: Emission Control Device	# 1	Satisfactory/Action Required:	SATISFACTORY	
Comment				
Corrective Action				Date:
Type: Gas Meter Run	# 0	Satisfactory/Action Required:	SATISFACTORY	
Comment				
Corrective Action				Date:
Type: Plunger Lift	# 9	Satisfactory/Action Required:	SATISFACTORY	
Comment				
Corrective Action				Date:
Type: Pig Station	# 1	Satisfactory/Action Required:	SATISFACTORY	
Comment				
Corrective Action				Date:
Type: Ancillary equipment	# 2	Satisfactory/Action Required:	SATISFACTORY	
Comment	Chemical unit at wellhead			
Corrective Action				Date:
Type: Horizontal Heated Separator	# 9	Satisfactory/Action Required:	SATISFACTORY	
Comment				
Corrective Action				Date:

Tanks and Berms: ☐ New Tank Tank ID: _____

Inspector Name: Murray, Richard

Contents	#	Capacity	Type	SE GPS
METHANOL	1	<100 BBLS	STEEL AST	39.485962,107.578832
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 Sufficent	Base Sufficent	Adequate
Corrective Action				Corrective Date
Comment				

Tanks and Berms: ☐ New Tank Tank ID: _____

Contents	#	Capacity	Type	SE GPS
CONDENSATE	6	500 BBLS	STEEL AST	39.486219,107.578354
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 Sufficent	Base Sufficent	Adequate
Corrective Action				Corrective Date
Comment				

Venting:

Yes/No	YES
Comment	Bradenhead valve open

Flaring:

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

Predrill

Location ID: 417088

Lease Road Adeq.: _____

Pads: _____

Soil Stockpile: _____

S/AR: _____

Corrective Action: _____

Date: _____

CDP Num.: _____

Form 2A COAs:

Group	User	Comment	Date
Agency	yokleyb	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.	05/05/2010
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.	05/05/2010

S/AR: SATISFACTORY**Comment:**

No dilling 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: 417063

Type: WELL

API Number: 045-19450

Status: PR

Insp. Status: PR

Producing Well

Comment: Plunger lift

Facility ID: 417068

Type: WELL

API Number: 045-19451

Status: PR

Insp. Status: PR

Inspector Name: Murray, Richard

Producing Well

Comment: **Plunger lift**

Facility ID: 417077 Type: WELL API Number: 045-19452 Status: PR Insp. Status: PR

Producing Well

Comment: **Plunger lift**

Facility ID: 417086 Type: WELL API Number: 045-19453 Status: PR Insp. Status: PR

Producing Well

Comment: **Plunger lift**

Facility ID: 417088 Type: WELL API Number: 045-19454 Status: PR Insp. Status: PR

Producing Well

Comment: **Plunger lift**

Facility ID: 417089 Type: WELL API Number: 045-19455 Status: PR Insp. Status: PR

Producing Well

Comment: **Plunger lift**

Facility ID: 417094 Type: WELL API Number: 045-19456 Status: PR Insp. Status: PR

Producing Well

Comment: **Plunger lift**

Facility ID: 417095 Type: WELL API Number: 045-19457 Status: PR Insp. Status: PR

Producing Well

Comment: **Plunger lift**

Facility ID: 417099 Type: WELL API Number: 045-19458 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:

Lat _____ Long _____

DWR Receipt Num: _____ Owner Name: _____ GPS : _____

Field Parameters:

Sample Location: _____

Inspector Name: Murray, Richard

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: 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:

Inspector Name: Murray, Richard

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 <input type="checkbox"/>	Multi-Well Location <input type="checkbox"/>

Storm Water:

Loc Erosion BMPs	BMP Maintenance	Lease Road Erosion BMPs	Lease BMP Maintenance	Chemical BMPs	Chemical BMP Maintenance	Comment
Berms	Pass					
		Sediment Traps	Pass			
		Gravel	Pass			
		Rip Rap	Pass			
Seeding	Pass					
		Check Dams	Pass			
		Ditches	Pass			
		Culverts	Pass			
Gravel	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
666802469	INSPECTION APPROVED	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3925258