

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:
08/23/2016
Document Number:
680702560
Overall Inspection:
SATISFACTORY

FIELD INSPECTION FORM

| | | | | | |
|---------------------|---------------|---------------|----------------------|--------------------------|-------------|
| Location Identifier | Facility ID | Loc ID | Inspector Name: | On-Site Inspection | 2A Doc Num: |
| | <u>243482</u> | <u>319437</u> | <u>Peterson, Tom</u> | <input type="checkbox"/> | |

Operator Information:

| | |
|-----------------------|--|
| OGCC Operator Number: | <u>69175</u> |
| Name of Operator: | <u>PDC ENERGY INC</u> |
| Address: | <u>1775 SHERMAN STREET - STE 3000</u> |
| City: | <u>DENVER</u> State: <u>CO</u> Zip: <u>80203</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 |
|--------------|-------|--------------------------|-----------------|
| Precup, Jim | | james.precup@state.co.us | |
| | | cogccinspection@pdce.com | All inspections |

Compliance Summary:

QtrQtr: NESW Sec: 21 Twp: 4N Range: 67W

| Insp. Date | Doc Num | Insp. Type | Insp Status | Satisfactory /Action Required | PA P/F/I | Pas/Fail (P/F) | Violation (Y/N) |
|------------|-----------|------------|-------------|-------------------------------|----------|----------------|-----------------|
| 07/29/2016 | 680702415 | PR | PR | SC | | | No |
| 05/09/2012 | 661601306 | PR | PR | SATISFACTORY | | | No |
| 12/03/2008 | 200128646 | PR | WO | SATISFACTORY | | | No |
| 01/06/2006 | 200082436 | PR | PR | SATISFACTORY | | Pass | No |
| 06/12/2003 | 200040186 | PR | PR | SATISFACTORY | | Pass | No |
| 12/04/2001 | 200022865 | PR | PR | SATISFACTORY | | Pass | No |
| 05/10/2001 | 200016825 | PR | PR | SATISFACTORY | | Pass | No |
| 05/12/1997 | 500166862 | PR | PR | | | | |
| 03/03/1997 | 500166861 | PR | PR | | | Pass | No |
| 07/21/1994 | 500166860 | | PR | | | Pass | No |

Inspector Comment:

Related Facilities:

| Facility ID | Type | Status | Status Date | Well Class | API Num | Facility Name | Insp Status | |
|-------------|------|--------|-------------|------------|-----------|-----------------|-------------|-------------------------------------|
| 243482 | WELL | PR | 04/23/2007 | OW | 123-11273 | BUNYAN 1 | PR | <input checked="" type="checkbox"/> |
| 418627 | WELL | PR | 07/31/2011 | OW | 123-31963 | Walters 21ODU | PR | <input checked="" type="checkbox"/> |
| 418641 | WELL | PR | 07/31/2011 | OW | 123-31966 | Walters 23-21DU | PR | <input checked="" type="checkbox"/> |
| 418642 | WELL | PR | 08/31/2011 | OW | 123-31967 | Ryland 20XD | PR | <input checked="" type="checkbox"/> |

Inspector Name: Peterson, Tom

| | | | | | | | | |
|--------|------|----|------------|----|-----------|-----------------|----|---|
| 418643 | WELL | PR | 08/31/2011 | OW | 123-31968 | Wedco 13-21DU | PR | ✗ |
| 418754 | WELL | PR | 08/31/2011 | OW | 123-31996 | Wedco 14-21DU | PR | ✗ |
| 418759 | WELL | PR | 07/31/2011 | OW | 123-31998 | Walters 21LDU | PR | ✗ |
| 418760 | WELL | PR | 10/01/2011 | OW | 123-31999 | Ryland 20YD | PR | ✗ |
| 418762 | WELL | PR | 07/31/2011 | OW | 123-32000 | Walters 21QDU | PR | ✗ |
| 418767 | WELL | PR | 08/30/2011 | OW | 123-32001 | Walters 24-21DU | PR | ✗ |

Equipment: Location Inventory

| | | | |
|------------------------------|------------------------|----------------------|-------------------------|
| Special Purpose Pits: _____ | Drilling Pits: _____ | Wells: <u>10</u> | Production Pits: _____ |
| Condensate Tanks: _____ | Water Tanks: <u>2</u> | Separators: <u>4</u> | 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: <u>3</u> | Dehydrator Units: _____ |
| Multi-Well Pits: _____ | Pigging Station: _____ | Flare: _____ | Fuel Tanks: _____ |

Location

| <u>Signs/Marker:</u> | | | | |
|----------------------|------------------------------|---|-------------------|---------|
| Type | Satisfactory/Action Required | Comment | Corrective Action | CA Date |
| TANK LABELS/PLACARDS | SATISFACTORY | | | |
| BATTERY | SATISFACTORY | Battery signage noted in prior inspection document #680702415 has been corrected. | | |
| CONTAINERS | SATISFACTORY | Methanol system | | |
| WELLHEAD | SATISFACTORY | x 10 | | |

Emergency Contact Number (S/AR): SATISFACTORY

Corrective Date: _____

Comment: _____

Corrective Action: _____

Spills:

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

Multiple Spills and Releases?

Fencing/:

| Type | Satisfactory/Action Required | Comment | Corrective Action | CA Date |
|--------------------|------------------------------|------------|-------------------|---------|
| WELLHEAD | SATISFACTORY | Panel x 10 | | |
| IGNITOR/COMBUST OR | SATISFACTORY | Panel x 2 | | |

Equipment:

| | | |
|--------------------|------|--|
| Type: Plunger Lift | # 10 | Satisfactory/Action Required: SATISFACTORY |
|--------------------|------|--|

| | | | |
|-----------------------------------|-----|--|--------------|
| Comment | | | |
| Corrective Action | | Date: | |
| Type: Ancillary equipment | # 3 | Satisfactory/Action Required: | SATISFACTORY |
| Comment | | Automation array, methanol system and ECD scrubber | |
| Corrective Action | | Date: | |
| Type: Horizontal Heated Separator | # 3 | Satisfactory/Action Required: | SATISFACTORY |
| Comment | | N40.29567 W-104.89931 | |
| Corrective Action | | Date: | |
| Type: Pig Station | # 1 | Satisfactory/Action Required: | SATISFACTORY |
| Comment | | N40.29569 W-104.89966 | |
| Corrective Action | | Date: | |
| Type: Compressor | # 1 | Satisfactory/Action Required: | SATISFACTORY |
| Comment | | N40.29670 W-104.89928 | |
| Corrective Action | | Date: | |
| Type: Bird Protectors | # 5 | Satisfactory/Action Required: | SATISFACTORY |
| Comment | | | |
| Corrective Action | | Date: | |
| Type: Gas Meter Run | # 1 | Satisfactory/Action Required: | SATISFACTORY |
| Comment | | Multiple tube meter run | |
| Corrective Action | | Date: | |
| Type: Emission Control Device | # 2 | Satisfactory/Action Required: | SATISFACTORY |
| Comment | | N40.29567 W-104.89929 | |
| Corrective Action | | Date: | |

Tanks and Berms: New Tank Tank ID: _____

| Contents | # | Capacity | Type | SE GPS |
|--------------------|--------------|----------|----------------|-----------------------|
| PRODUCED WATER | 1 | 100 BBLS | PBV FIBERGLASS | 40.290670,-104.899360 |
| 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 | | | | |

Tanks and Berms: New Tank Tank ID: _____

Inspector Name: Peterson, Tom

| | | | | |
|-----------|---|----------|-----------|-----------------------|
| Contents | # | Capacity | Type | SE GPS |
| CRUDE OIL | 3 | 400 BBLS | STEEL AST | 40.290670,-104.899360 |

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

Venting:

| | |
|---------|----|
| Yes/No | NO |
| Comment | |

Flaring:

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

Predrill

Location ID: 243482

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: 243482 Type: WELL API Number: 123-11273 Status: PR Insp. Status: PR

Producing Well

Comment: PR

BradenHead

Comment: Bradenhead is exposed at surface.

CA: _____

CA Date: _____

Facility ID: 418627 Type: WELL API Number: 123-31963 Status: PR Insp. Status: PR

Producing Well

Comment: PR

BradenHead

Comment: Bradenhead is exposed at surface.

CA:

CA Date:

Facility ID: 418641 Type: WELL API Number: 123-31966 Status: PR Insp. Status: PR

Producing Well

Comment: PR

BradenHead

Comment: Bradenhead is exposed at surface.

CA:

CA Date:

Facility ID: 418642 Type: WELL API Number: 123-31967 Status: PR Insp. Status: PR

Producing Well

Comment: PR

BradenHead

Comment: Bradenhead is exposed at surface.

CA:

CA Date:

Facility ID: 418643 Type: WELL API Number: 123-31968 Status: PR Insp. Status: PR

Producing Well

Comment: PR

BradenHead

Comment: Bradenhead is exposed at surface.

CA:

CA Date:

Facility ID: 418754 Type: WELL API Number: 123-31996 Status: PR Insp. Status: PR

Producing Well

Comment: PR

BradenHead

Comment: Bradenhead is exposed at surface.

CA:

CA Date:

Facility ID: 418759 Type: WELL API Number: 123-31998 Status: PR Insp. Status: PR

Producing Well

Comment: PR

BradenHead

Comment: Bradenhead is exposed at surface.

CA:

CA Date:

Facility ID: 418760 Type: WELL API Number: 123-31999 Status: PR Insp. Status: PR

Producing Well

Comment: PR

BradenHead

Comment: Bradenhead is exposed at surface.

CA:

CA Date:

Facility ID: 418762 Type: WELL API Number: 123-32000 Status: PR Insp. Status: PR

Producing Well

Comment: PR

BradenHead

Comment: Bradenhead is exposed at surface.

CA:

CA Date:

Facility ID: 418767 Type: WELL API Number: 123-32001 Status: PR Insp. Status: PR

Producing Well

Comment: PR

BradenHead

Comment: Bradenhead is exposed at surface.

CA:

CA Date:

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: IRRIGATED

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: IRRIGATED

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 _____

Inspector Name: Peterson, Tom

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 | Gravel | Pass | Self Inspection | Pass | |

S/A/V: SATISFACTORY _____ Corrective Date: _____

Comment: _____

CA: _____

Pits: NO SURFACE INDICATION OF PIT