

**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:  
08/29/2016  
Document Number:  
673403562  
Overall Inspection:  
SATISFACTORY

**FIELD INSPECTION FORM**

|                     |               |               |                       |                          |             |
|---------------------|---------------|---------------|-----------------------|--------------------------|-------------|
| Location Identifier | Facility ID   | Loc ID        | Inspector Name:       | On-Site Inspection       | 2A Doc Num: |
|                     | <u>222882</u> | <u>312931</u> | <u>Waldron, Emily</u> | <input type="checkbox"/> |             |

**Operator Information:**

|                       |  |
|-----------------------|--|
| OGCC Operator Number: | <u>10548</u>                                     |
| Name of Operator:     | <u>HRM RESOURCES II LLC</u>                      |
| Address:              | <u>410 17TH STREET #1600</u>                     |
| City:                 | <u>DENVER</u> State: <u>CO</u> Zip: <u>80202</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         |
|-----------------|--------------|----------------------|-----------------|
| Prohaska, April | 303-893-6621 | aprohaska@hrmres.com | All Inspections |
| Pape, Terry     | 970-768-5700 | tpape@hrmres.com     | All Inspections |

**Compliance Summary:**

QtrQtr: NENW Sec: 13 Twp: 10N Range: 94W

| Insp. Date | Doc Num   | Insp. Type | Insp Status | Satisfactory /Action Required | PA P/F/I   | Pas/Fail (P/F) | Violation (Y/N) |
|------------|-----------|------------|-------------|-------------------------------|------------|----------------|-----------------|
| 04/01/2016 | 673403101 | PR         | PR          | SC                            |            |                | No              |
| 09/28/2015 | 673402486 | PR         | PR          | SATISFACTORY                  |            |                | No              |
| 12/19/2014 | 673401582 | PR         | PR          | ACTION REQUIRED               |            |                | No              |
| 01/10/2013 | 669300309 | PR         | PR          | ACTION REQUIRED               | In Process |                | No              |
| 08/29/2012 | 669300128 | PR         | PR          | ALLEGED VIOLATION             | In Process |                | Yes             |
| 05/09/2011 | 200311214 | PR         | PR          | ACTION REQUIRED               |            |                | Yes             |
| 06/05/2000 | 200008039 | PR         | PR          | SATISFACTORY                  |            | Pass           | No              |
| 08/06/1996 | 500154569 | PR         | PR          |                               |            | Pass           | No              |

**Inspector Comment:**

**Related Facilities:**

| Facility ID | Type     | Status | Status Date | Well Class | API Num   | Facility Name                             | Insp Status |                                     |
|-------------|----------|--------|-------------|------------|-----------|---|-------------|-------------------------------------|
| 222882      | WELL     | PR     | 04/23/2014  | GW         | 081-06242 | BIGHOLE-FED LAND BANK 13-1                | PR          | <input checked="" type="checkbox"/> |
| 430552      | PIPELINE | XX     | 10/24/2012  |            | -         | Big Hole Fed 13-1 Pipeline Release 430552 | XX          | <input type="checkbox"/>            |

**Equipment:**

Location Inventory

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

Inspector Name: Waldron, Emily

|                              |                        |                     |                         |
|------------------------------|------------------------|---------------------|-------------------------|
| 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                 |         |                   |         |
| BATTERY              | SATISFACTORY                 |         |                   |         |
| TANK LABELS/PLACARDS | SATISFACTORY                 |         |                   |         |

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

**Spills:**

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

**Equipment:**

|                                   |     |                               |              |
|-----------------------------------|-----|-------------------------------|--------------|
| Type: Bird Protectors             | #   | Satisfactory/Action Required: | SATISFACTORY |
| Comment                           |     |                               |              |
| Corrective Action                 |     |                               | Date:        |
| Type: Horizontal Heated Separator | # 3 | Satisfactory/Action Required: | SATISFACTORY |
| Comment                           |     |                               |              |
| Corrective Action                 |     |                               | Date:        |
| Type: Deadman # & Marked          | # 4 | Satisfactory/Action Required: | SATISFACTORY |
| Comment                           |     |                               |              |
| Corrective Action                 |     |                               | Date:        |
| Type: Plunger Lift                | # 1 | Satisfactory/Action Required: | SATISFACTORY |
| Comment                           |     |                               |              |
| Corrective Action                 |     |                               | Date:        |
| Type: Gas Meter Run               | # 1 | Satisfactory/Action Required: | SATISFACTORY |
| Comment                           |     |                               |              |
| Corrective Action                 |     |                               | Date:        |

**Tanks and Berms:**

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

| Contents  | # | Capacity | Type      | SE GPS |
|-----------|---|----------|-----------|--------|
| CRUDE OIL | 1 | 200 BBLS | STEEL AST | ,      |

Inspector Name: Waldron, Emily

|      |              |          |  |
|------|--------------|----------|--|
| 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 |                     |                     | Adequate    |

|                   |  |                 |  |
|-------------------|--|-----------------|--|
| Corrective Action |  | Corrective Date |  |
| Comment           |  |                 |  |

**Tanks and Berms:**  New Tank Tank ID: \_\_\_\_\_

| Contents       | # | Capacity | Type      | SE GPS |
|----------------|---|----------|-----------|--------|
| PRODUCED WATER | 2 | 500 BBLS | STEEL AST | ,      |

|      |              |          |  |
|------|--------------|----------|--|
| 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 |                     |                     | Adequate    |

|                   |  |                 |  |
|-------------------|--|-----------------|--|
| Corrective Action |  | Corrective Date |  |
| Comment           |  |                 |  |

**Tanks and Berms:**  New Tank Tank ID: \_\_\_\_\_

| Contents       | # | Capacity | Type      | SE GPS                |
|----------------|---|----------|-----------|-----------------------|
| PRODUCED WATER | 3 | 400 BBLS | STEEL AST | 40.831560,-107.900480 |

|      |              |          |  |
|------|--------------|----------|--|
| 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 |                     |                     | 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: 222882

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: | <u>222882</u> | Type: | <u>WELL</u> | API Number: | <u>081-06242</u> | Status: | <u>PR</u> | Insp. Status: | <u>PR</u> |
|--------------|---------------|-------|-------------|-------------|------------------|---------|-----------|---------------|-----------|

**Producing Well**

Comment:

**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): \_\_\_\_\_

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? \_\_\_\_\_

CM \_\_\_\_\_

CA \_\_\_\_\_ CA Date \_\_\_\_\_

Unused or unneeded equipment onsite? \_\_\_\_\_

CM \_\_\_\_\_

CA \_\_\_\_\_ CA Date \_\_\_\_\_

Pit, cellars, rat holes and other bores closed? \_\_\_\_\_

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? \_\_\_\_\_

Inspector Name: Waldron, Emily

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

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

Comment: **No apparent soil migration; erosion or soil movement.**

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   |
|--------------|---------------------|---|
| 673403562    | INSPECTION APPROVED | <a href="http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3939471">http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3939471</a> |

