

**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:

09/06/2016

Document Number:

680301054

Overall Inspection:

SATISFACTORY w/ CMT
or AR**FIELD INSPECTION FORM**

| | | | | |
|---------------------|-------------|--------|-----------------|---|
| Location Identifier | Facility ID | Loc ID | Inspector Name: | On-Site Inspection <input type="checkbox"/> |
| | 219170 | 312161 | SCHURE, KYM | 2A Doc Num: _____ |

Operator Information:OGCC Operator Number: 10380Name of Operator: BENCHMARK ENERGY LLCAddress: PO BOX 8747City: PRATT State: KS Zip: 67124

- ☐ 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 |
|--------------|-------|------------------------|---------|
| Burn, Diana | | diana.burn@state.co.us | |

Compliance Summary:QtrQtr: SESW Sec: 1 Twp: 8N Range: 54W

| Insp. Date | Doc Num | Insp. Type | Insp Status | Satisfactory /Action Required | PA P/F/I | Pas/Fail (P/F) | Violation (Y/N) |
|------------|-----------|------------|-------------|-------------------------------|------------|----------------|-----------------|
| 07/27/2016 | 680000588 | TA | TA | SATISFACTORY | | | No |
| 05/17/2016 | 680300767 | TA | TA | SC | | | No |
| 08/19/2015 | 680300259 | TA | TA | SATISFACTORY | | | No |
| 07/30/2015 | 680300166 | TA | TA | SATISFACTORY | | | No |
| 11/10/2014 | 667200644 | TA | TA | SATISFACTORY | | | No |
| 08/12/2014 | 667200366 | TA | TA | ALLEGED VIOLATION | | | Yes |
| 07/23/2014 | 667200235 | TA | TA | ALLEGED VIOLATION | | | Yes |
| 08/08/2013 | 664001187 | TA | TA | SATISFACTORY | | | No |
| 07/09/2012 | 663300292 | TA | TA | ACTION REQUIRED | In Process | | No |
| 06/16/2011 | 200312782 | MI | TA | SATISFACTORY | | | No |
| 05/03/2011 | 200309692 | RT | TA | SATISFACTORY | | | No |
| 05/24/2010 | 200253086 | RT | TA | SATISFACTORY | | | No |
| 08/04/2009 | 200215932 | RT | TA | SATISFACTORY | | | No |
| 04/22/2008 | 200130646 | RT | TA | SATISFACTORY | | | No |
| 06/20/2007 | 200115799 | RT | TA | SATISFACTORY | | Pass | No |
| 06/08/2006 | 200091666 | MI | TA | SATISFACTORY | | Pass | No |
| 07/05/2005 | 200074133 | RT | TA | SATISFACTORY | | Pass | No |
| 06/15/2004 | 200055915 | RT | | SATISFACTORY | | Pass | No |
| 04/02/2003 | 200036995 | RT | TA | SATISFACTORY | | Pass | No |
| 07/18/2002 | 200028852 | RT | TA | SATISFACTORY | Pass | Pass | No |
| 07/26/2001 | 200018312 | MI | TA | SATISFACTORY | | Pass | No |

Inspector Name: SCHURE, KYM

| | | | | | | | |
|------------|-----------|----|----|--------------|--|------|----|
| 08/03/2000 | 200008439 | RT | SI | SATISFACTORY | | Pass | No |
|------------|-----------|----|----|--------------|--|------|----|

Inspector Comment:

Slick-line work performed to establish CIBP depth and fluid level. CIBP depth = 4844'. Fluid level not established.

Related Facilities:

| Facility ID | Type | Status | Status Date | Well Class | API Num | Facility Name | Insp Status | |
|-------------|------|--------|-------------|------------|-----------|-------------------------------|-------------|-------------------------------------|
| 219170 | WELL | TA | 01/01/1999 | ERIW | 075-06000 | NW GRAYLIN D-SAND UNIT 6-W | TA | <input checked="" type="checkbox"/> |

Equipment:Location Inventory

| | | | |
|------------------------------|------------------------|---------------------|-------------------------|
| 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: Other | # 0 | Satisfactory/Action Required: SATISFACTORY |
| Comment | No change in surface equipment inventoried. | |
| Corrective Action | | Date: |

Venting:

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

Flaring:

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

Predrill

Location ID: 219170

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: 219170 Type: WELL API Number: 075-06000 Status: TA Insp. Status: TA

Producing Well

Comment: CIBP depth = 4844'.

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: _____

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? _____

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 REVEGETATIONCropland

Top soil replaced _____

Recontoured _____

Perennial forage re-established _____

Non-Cropland

Top soil replaced _____

Recontoured _____

80% Revegetation _____

1003 f. Weeds Noxious weeds? _____

Comment: _____

Inspector Name: SCHURE, KYM

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 |
|------------------|-----------------|-------------------------|-----------------------|---------------|--------------------------|---------|
| Other | | Other | | | | |

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

Comment: Use BMP's for stormwater erosion control and management.

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 |
|--------------|---------------------|---|
| 680301054 | INSPECTION APPROVED | http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3943736 |