

**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:

09/12/2016

Document Number:

666802555

Overall Inspection:

SATISFACTORY**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	422521	335543	Murray, Richard	<input type="checkbox"/>	

Operator Information:OGCC Operator Number: 10447Name of Operator: URSA OPERATING COMPANY LLCAddress: 1050 17TH STREET #1700City: DENVER State: CO Zip: 80265

- ☐ 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
Knudson, Dwayne	970-456-3335	dknudson@ursaresources.com	All Inspections

Compliance Summary:QtrQtr: SWSW Sec: 16 Twp: 6S Range: 92W**Inspector Comment:****Drilling permits expired 4/2013****Related Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status	
292194	WELL	PR	01/17/2012	GW	045-14634	LEFT HAND FED CA A4	PR	<input checked="" type="checkbox"/>
292195	WELL	AL	07/14/2011	LO	045-14633	LEFT HAND FED CA A7	AL	<input type="checkbox"/>
292196	WELL	XX	03/11/2011	LO	045-14632	LEFT HAND FED CA A5	XX	<input checked="" type="checkbox"/>
292197	WELL	AL	07/14/2011	LO	045-14631	LEFT HAND FED CA A8	AL	<input type="checkbox"/>
422405	WELL	PR	10/03/2011	GW	045-20571	LEFT HAND FED CA A9	PR	<input checked="" type="checkbox"/>
422408	WELL	PR	11/15/2011	GW	045-20572	LEFT HAND FED CA A3	PR	<input checked="" type="checkbox"/>
422425	WELL	PR	08/21/2011	GW	045-20577	LEFT HAND FED CA A10	PR	<input checked="" type="checkbox"/>
422456	WELL	PR	10/06/2011	GW	045-20581	LEFT HAND FED CA A2	PR	<input checked="" type="checkbox"/>
422521	WELL	XX	04/06/2011	LO	045-20588	LEFT HAND FED CA A11	XX	<input checked="" type="checkbox"/>
422529	WELL	XX	04/06/2011	LO	045-20592	LEFT HAND FED CA A1	XX	<input checked="" type="checkbox"/>
422574	WELL	XX	04/06/2011	LO	045-20605	LEFT HAND FED CA A12	XX	<input checked="" type="checkbox"/>
422680	WELL	XX	04/17/2011	LO	045-20607	LEFT HAND FED CA A6	XX	<input checked="" type="checkbox"/>

Equipment:Location Inventory

Special Purpose Pits: _____	Drilling Pits: _____	Wells: <u>12</u>	Production Pits: _____
Condensate Tanks: <u>2</u>	Water Tanks: <u>4</u>	Separators: <u>4</u>	Electric Motors: _____
Gas or Diesel Motors: _____	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>1</u>	Oil Tanks: _____	Dehydrator Units: _____
Multi-Well Pits: _____	Pigging Station: <u>1</u>	Flare: _____	Fuel Tanks: _____

Location**Signs/Marker:**

Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
BATTERY	SATISFACTORY	AIRS ID 045-2228-001		

Emergency Contact Number (S/AR): SATISFACTORY

Corrective Date: _____

Comment: _____

Corrective Action: _____

Spills:

Type	Area	Volume	Corrective action	CA Date
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☐ Multiple Spills and Releases?**Equipment:**

Type: Emission Control Device	# 1	Satisfactory/Action Required:	SATISFACTORY
Comment			
Corrective Action			Date:
Type: Plunger Lift	# 5	Satisfactory/Action Required:	SATISFACTORY
Comment			
Corrective Action			Date:
Type: Pig Station	# 0	Satisfactory/Action Required:	SATISFACTORY
Comment			
Corrective Action			Date:
Type: Gas Meter Run	# 0	Satisfactory/Action Required:	SATISFACTORY
Comment			
Corrective Action			Date:
Type: Horizontal Heated Separator	# 6	Satisfactory/Action Required:	SATISFACTORY
Comment			
Corrective Action			Date:

Tanks and Berms:☐ New Tank

Tank ID: _____

Contents	#	Capacity	Type	SE GPS
PRODUCED WATER	1	300 BBLS	STEEL AST	,
S/AR	SATISFACTORY	Comment:	Centralized battery	

Inspector Name: Murray, Richard

Corrective Action:		Corrective Date:	
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Paint

Condition	Adequate
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Other (Content) _____

Other (Capacity) _____

Other (Type) _____

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance

Corrective Action		Corrective Date	
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Comment	
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Tanks and Berms:

☐ New Tank

Tank ID: _____

Contents	#	Capacity	Type	SE GPS
CONDENSATE	2	300 BBLS	STEEL AST	39.522273,-107.677811

S/AR	SATISFACTORY	Comment:	
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Corrective Action:		Corrective Date:	
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Paint

Condition	Adequate
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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	
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Comment	
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Venting:

Yes/No	NO
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Comment	
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Flaring:

Type		Satisfactory/Action Required	
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Comment: _____

Corrective Action:		Correct Action Date:	
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Predrill

Location ID: 422521

Lease Road Adeq.: _____

Pads: _____

Soil Stockpile: _____

S/AR: _____

Corrective Action: _____ Date: _____ CDP Num.: _____

Form 2A COAs:

Group	User	Comment	Date
OGLA	kubeczkod	<p>GENERAL SITE COAs:</p> <p>Operator must implement best management practices to contain any unintentional release of fluids, including any fluids conveyed via temporary surface pipelines or buried pipelines.</p> <p>Any pit constructed to hold fluids (reserve pit, production pit, frac pit; except for flare pit, if built) must be lined, or a closed loop system (as indicated by operator on the Form 2A) must be implemented .</p> <p>Operator must ensure secondary containment for any volume of fluids contained at well site during drilling and completion operations; including, but not limited to, construction of a berm or diversion dike, diversion/collection trenches within and/or outside of berms/dikes, site grading, or other comparable measures (i.e., best management practices (BMPs) associated with stormwater management) sufficiently protective of nearby surface water. Any berm constructed at the well pad location will be stabilized, inspected at regular intervals (at least every 14 days), and maintained in good condition.</p> <p>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.</p> <p>Flowback and stimulation fluids must be sent to tanks to allow the sand to settle out before the fluids can be placed into any pipeline or pit located on the well pad. The flowback and stimulation fluid tanks must be placed on the well pad in an area with additional downgradient perimeter berming. The area where flowback fluids will be stored/reused must be constructed to be sufficiently impervious to contain any spilled or released material (per Rule 604.a.(4)).</p> <p>Berms or other containment devices shall be constructed in compliance with Rule 604.a.(4) around crude oil, condensate, and produced water storage tanks.</p>	03/28/2011

S/AR: SATISFACTORY

Comment: No visual sign of cuttings or pits

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:

Inspector Name: Murray, Richard

Summary of Operator Response to Landowner Issues:

Onsite Inspection Memorandum Summarizing Discussions at Inspection as Attachment:

Facility

Facility ID: 292194 Type: WELL API Number: 045-14634 Status: PR Insp. Status: PR

Producing Well

Comment: Plunger lift

Facility ID: 292196 Type: WELL API Number: 045-14632 Status: XX Insp. Status: XX

Producing Well

Comment: Plunger lift

Facility ID: 422405 Type: WELL API Number: 045-20571 Status: PR Insp. Status: PR

Producing Well

Comment: Plunger lift

Facility ID: 422408 Type: WELL API Number: 045-20572 Status: PR Insp. Status: PR

Producing Well

Comment: Plunger lift

Facility ID: 422425 Type: WELL API Number: 045-20577 Status: PR Insp. Status: PR

Producing Well

Comment: Plunger lift

Facility ID: 422456 Type: WELL API Number: 045-20581 Status: PR Insp. Status: PR

Producing Well

Comment: Plunger lift

Facility ID: 422521 Type: WELL API Number: 045-20588 Status: XX Insp. Status: XX

Facility ID: 422529 Type: WELL API Number: 045-20592 Status: XX Insp. Status: XX

Facility ID: 422574 Type: WELL API Number: 045-20605 Status: XX Insp. Status: XX

Facility ID: 422680 Type: WELL API Number: 045-20607 Status: XX Insp. Status: XX

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 :

Inspector Name: Murray, Richard

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: 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:

Inspector Name: Murray, Richard

Date Final Reclamation Started: _____

Date Final Reclamation Completed: _____

Final Land Use: RANGELAND

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
		Ditches	Pass			
Berms	Pass					
Gravel	Pass					
Rip Rap	Pass					
		Gravel	Pass			
Seeding						
		Culverts	Pass			
Waddles	Pass					

S/A/V: SATISFACTORY

Corrective Date: _____

Comment: _____

CA: _____

Pits: ☒ NO SURFACE INDICATION OF PIT