

**FORM  
INSP**Rev  
X/15**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:

12/02/2016

Submitted Date:

12/13/2016

Document Number:

680301455**FIELD INSPECTION FORM**
 Loc ID 313732 Inspector Name: SCHURE, KYM On-Site Inspection ☐ 2A Doc Num: \_\_\_\_\_
**Operator Information:**OGCC Operator Number: 10203Name of Operator: BLACK RAVEN ENERGY INCAddress: 165 S UNION BLVD SUITE 410City: LAKEWOOD State: CO Zip: 80228**Status Summary:**

- ☐ THIS IS A FOLLOW UP INSPECTION
- ☐ FOLLOW UP INSPECTION REQUIRED
- ☒ NO FOLLOW UP INSPECTION REQUIRED

**Findings:**7 Number of Comments0 Number of Corrective Actions☐ Corrective Action Response Requested**Contact Information:**

| Contact Name | Phone | Email                        | Comment |
|--------------|-------|------------------------------|---------|
| Wehrer, Gene |       | gwehrer@enerjexresources.com |         |

**Inspected Facilities:**

| Facility ID | Type | Status | Status Date | Well Class | API Num   | Facility Name | Insp Status |
|-------------|------|--------|-------------|------------|-----------|---------------|-------------|
| 225001      | WELL | TA     | 01/21/2013  | GW         | 087-05394 | VERONICA 1    | TA          |

**General Comment:**[Bradenhead Inspection](#)

**Location**

|                    |              |       |  |
|--------------------|--------------|-------|--|
| <b>Lease Road:</b> |              |       |  |
| Type               | Access       |       |  |
| comment:           | Satisfactory |       |  |
| Corrective Action  | L            | Date: |  |

Overall Good: ☐

|                      |              |       |  |
|----------------------|--------------|-------|--|
| <b>Signs/Marker:</b> |              |       |  |
| Type                 | WELLHEAD     |       |  |
| Comment:             | Satisfactory |       |  |
| Corrective Action:   |              | Date: |  |

|                           |              |  |             |
|---------------------------|--------------|--|-------------|
| Emergency Contact Number: |              |  |             |
| Comment:                  | Satisfactory |  |             |
| Corrective Action:        |              |  | Date: _____ |

Overall Good: ☒

|                |      |        |  |  |  |
|----------------|------|--------|--|--|--|
| <b>Spills:</b> |      |        |  |  |  |
| Type           | Area | Volume |  |  |  |

In Containment: No

Comment: ☐ Multiple Spills and Releases?

|                    |                                     |       |                 |
|--------------------|-------------------------------------|-------|-----------------|
| <b>Equipment:</b>  |                                     |       | corrective date |
| Type: Other        | # 0                                 |       |                 |
| Comment:           | No change in equipment inventoried. |       |                 |
| Corrective Action: |                                     | Date: |                 |

|                    |  |       |  |
|--------------------|--|-------|--|
| <b>Venting:</b>    |  |       |  |
| Yes/No             |  |       |  |
| Comment:           |  |       |  |
| Corrective Action: |  | Date: |  |

|                    |  |       |  |
|--------------------|--|-------|--|
| <b>Flaring:</b>    |  |       |  |
| Type               |  |       |  |
| Comment:           |  |       |  |
| Corrective Action: |  | Date: |  |

| Inspected Facilities             |        |       |      |             |           |         |    |               |    |
|----------------------------------|--------|-------|------|-------------|-----------|---------|----|---------------|----|
| Facility ID:                     | 225001 | Type: | WELL | API Number: | 087-05394 | Status: | TA | Insp. Status: | TA |
|                                  |        |       |      |             |           |         |    |               |    |
| BradenHead                       |        |       |      |             |           |         |    |               |    |
|                                  |        |       |      |             |           |         |    |               |    |
| Comment: Instantaneous PSIG = 0. |        |       |      |             |           |         |    |               |    |
| Corrective Action:               |        |       |      |             |           |         |    |               |    |
| Date:                            |        |       |      |             |           |         |    |               |    |

**Reclamation - Storm Water - Pit****Storm Water:**

|                  |                 |                         |                       |               |                          |         |
|------------------|-----------------|-------------------------|-----------------------|---------------|--------------------------|---------|
| Loc Erosion BMPs | BMP Maintenance | Lease Road Erosion BMPs | Lease BMP Maintenance | Chemical BMPs | Chemical BMP Maintenance | Comment |
| Other            | In Process      | Other                   | In Process            |               |                          |         |

Comment: [Use BMP's for stormwater erosion management](#)

Corrective Action:

Date: \_\_\_\_\_

**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   |
|--------------|----------------------|---|
| 680301455    | INSPECTION SUBMITTED | <a href="http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4025962">http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4025962</a> |