

**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:

01/09/2017

Submitted Date:

01/09/2017

Document Number:

672500295**FIELD INSPECTION FORM**

| | | | | |
|------------------|---------------------------------|---------------------------------------------|-------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Loc ID 333308 | Inspector Name: Gomez, Jason | On-Site Inspection <input type="checkbox"/> | 2A Doc Num: _____ | Status Summary: <input type="checkbox"/> THIS IS A FOLLOW UP INSPECTION <input type="checkbox"/> FOLLOW UP INSPECTION REQUIRED <input type="checkbox"/> NO FOLLOW UP INSPECTION REQUIRED Findings: 33 Number of Comments 0 Number of Corrective Actions <input type="checkbox"/> Corrective Action Response Requested |
|------------------|---------------------------------|---------------------------------------------|-------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

Operator Information:OGCC Operator Number: 10459Name of Operator: EXTRACTION OIL & GAS LLCAddress: 370 17TH STREET SUITE 5300City: DENVER State: CO Zip: 80202**Contact Information:**

| Contact Name | Phone | Email | Comment |
|--------------|-------|---------------------------------------|---------|
| , | | COGCCinspections@extracti onog.com | |

Inspected Facilities:

| Facility ID | Type | Status | Status Date | Well Class | API Num | Facility Name | Insp Status |
|-------------|------|--------|-------------|------------|-----------|-----------------|-------------|
| 291601 | WELL | PR | 03/17/2014 | OW | 123-26094 | MATRIX 14-29 | PR |
| 291619 | WELL | PR | 03/17/2014 | OW | 123-26095 | MATRIX 13-29 | PR |
| 419387 | WELL | PR | 02/07/2014 | OW | 123-32222 | MATRIX 23-29 | PR |
| 419388 | WELL | PR | 10/28/2013 | GW | 123-32223 | MATRIX 24-29 | PR |
| 423985 | WELL | PR | | OW | 123-33824 | MATRIX 24-29-17 | PR |
| 440132 | WELL | DG | 11/21/2016 | LO | 123-40692 | Matrix A-29HN | DG |
| 440133 | WELL | DG | 11/20/2016 | LO | 123-40693 | Matrix G-29HN | DG |
| 440134 | WELL | DG | 11/09/2016 | LO | 123-40694 | Matrix F-29HN | DG |
| 440135 | WELL | PR | 06/14/2015 | OW | 123-40695 | Matrix Q-29HN | PR |
| 440136 | WELL | DG | 11/11/2016 | LO | 123-40696 | Matrix T-29HN | DG |
| 440137 | WELL | DG | 11/22/2016 | LO | 123-40697 | Matrix B-29HN | DG |
| 440138 | WELL | PR | 06/27/2015 | OW | 123-40698 | Matrix M-29HN | PR |
| 440140 | WELL | PR | 07/07/2015 | OW | 123-40700 | Matrix O-29HN | PR |
| 440141 | WELL | PR | 06/17/2015 | OW | 123-40701 | Matrix J-29HN | PR |
| 440142 | WELL | PR | 06/25/2015 | OW | 123-40702 | Matrix K-29HN | PR |
| 440143 | WELL | PR | 06/27/2015 | OW | 123-40703 | Matrix P-29HC | PR |
| 440144 | WELL | PR | 06/25/2015 | OW | 123-40704 | MATRIX L-29HC | PR |
| 440145 | WELL | DG | 11/08/2016 | LO | 123-40705 | Matrix E-29HN | DG |
| 440347 | WELL | DG | 11/10/2016 | LO | 123-40792 | Matrix S-29HC | DG |
| 440349 | WELL | PR | 06/17/2015 | OW | 123-40794 | Matrix N-29HC | PR |
| 440534 | WELL | DG | 11/22/2016 | LO | 123-40894 | Matrix C-29HN | DG |
| 440535 | WELL | DG | 11/23/2016 | LO | 123-40895 | Matrix D-29HC | DG |

General Comment:



LocationOverall Good: ☒

| | | | |
|----------------------|----------|-------|--|
| Signs/Marker: | | | |
| Type | WELLHEAD | | |
| Comment: | | | |
| Corrective Action: | | Date: | |
| Type | WELLHEAD | | |
| Comment: | | | |
| Corrective Action: | | Date: | |
| Type | WELLHEAD | | |
| Comment: | | | |
| Corrective Action: | | Date: | |
| Type | WELLHEAD | | |
| Comment: | | | |
| Corrective Action: | | Date: | |
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| Comment: | | | |
| Corrective Action: | | Date: | |
| Type | WELLHEAD | | |
| Comment: | | | |
| Corrective Action: | | Date: | |
| Type | WELLHEAD | | |
| Comment: | | | |
| Corrective Action: | | Date: | |

| | | | |
|--------------------|----------------------|-------|--|
| Comment: | | | |
| Corrective Action: | | Date: | |
| Type | BATTERY | | |
| Comment: | | | |
| Corrective Action: | | Date: | |
| Type | TANK LABELS/PLACARDS | | |
| Comment: | | | |
| Corrective Action: | | Date: | |
| Type | WELLHEAD | | |
| Comment: | | | |
| Corrective Action: | | Date: | |

Emergency Contact Number:

| | | |
|--------------------|--|-------------|
| Comment: | | Date: _____ |
| Corrective Action: | | |

Overall Good: ☒

| | | | | | |
|----------------|------|--------|--|--|--|
| Spills: | | | | | |
| Type | Area | Volume | | | |

In Containment: No

Comment: ☐ Multiple Spills and Releases?

| | | | |
|--------------------|-----------------------------------------------------------------|-------|--|
| Fencing/: | | | |
| Type | OTHER | | |
| Comment: | BALSE TO THE WEST OF DRILLING SITE | | |
| Corrective Action: | | Date: | |
| Type | SEPARATOR | | |
| Comment: | 6'chain link | | |
| Corrective Action: | | Date: | |
| Type | OTHER | | |
| Comment: | APPROX 12' SOUND WALLS AROUND COMPRESSOR AT LOCATION ON NW SIDE | | |
| Corrective Action: | | Date: | |

| | | | |
|-----------------------|------|-------|-----------------|
| Equipment: | | | corrective date |
| Type: Bird Protectors | # 16 | | |
| Comment: | | | |
| Corrective Action: | | Date: | |
| Type: Pig Station | # 1 | | |
| Comment: | | | |
| Corrective Action: | | Date: | |
| Type: Gas Meter Run | # 13 | | |
| Comment: | | | |

| | | | |
|-------------------------------|------------------------------|-------|--|
| Corrective Action: | | Date: | |
| Type: Emission Control Device | # 5 | | |
| Comment: | | | |
| Corrective Action: | | Date: | |
| Type: Plunger Lift | # 14 | | |
| Comment: | | | |
| Corrective Action: | | Date: | |
| Type: Compressor | # 4 | | |
| Comment: | | | |
| Corrective Action: | | Date: | |
| Type: Ancillary equipment | # 2 | | |
| Comment: | methonal pumps w/containment | | |
| Corrective Action: | | Date: | |
| Type: Vertical Separator | # 8 | | |
| Comment: | | | |
| Corrective Action: | | Date: | |

Tanks and Berms:

| Contents | # | Capacity | Type | Tank ID | SE GPS |
|--------------------|---|----------|----------------|---------|-----------------------|
| PRODUCED WATER | 1 | 100 BBLS | PBV FIBERGLASS | | 40.453450,-104.689130 |
| Comment: | | | | | |
| Corrective Action: | | | | | Date: |

Paint

| | |
|------------------|----------|
| Condition | Adequate |
| Other (Content) | |
| Other (Capacity) | |
| Other (Type) | |

Berms

| Type | Capacity | Permeability (Wall) | Permeability (Base) | Maintenance |
|--------------------|------------|---------------------|---------------------|-------------|
| Other | Adequate | Walls Sufficent | Base Sufficent | Adequate |
| Comment: | METAL/DIRT | | | |
| Corrective Action: | | | | Date: |

| Contents | # | Capacity | Type | Tank ID | SE GPS |
|--------------------|---|----------|----------------|---------|-----------------------|
| PRODUCED WATER | 4 | 500 BBLS | FIBERGLASS AST | | 40.453450,-104.689130 |
| Comment: | | | | | |
| Corrective Action: | | | | | 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 | | |
| Comment: | | | | | | |
| Corrective Action: | | | | Date: | | |
| Contents | # | Capacity | Type | Tank ID | SE GPS | |
| CRUDE OIL | 5 | 300 BBLS | STEEL AST | | 40.453450,-104.689130 | |
| Comment: | | | | | | |
| Corrective Action: | | | | Date: | | |
| Paint | | | | | | |
| Condition | Adequate | | | | | |
| Other (Content) | | | | | | |
| Other (Capacity) | | | | | | |
| Other (Type) | | | | | | |
| Berms | | | | | | |
| Type | Capacity | Permeability (Wall) | Permeability (Base) | Maintenance | | |
| Other | Adequate | Walls Sufficient | Base Sufficient | Adequate | | |
| Comment: METAL/DIRT | | | | | | |
| Corrective Action: | | | | Date: | | |
| Contents | # | Capacity | Type | Tank ID | SE GPS | |
| CRUDE OIL | 12 | 500 BBLS | STEEL AST | | 40.453420,-104.688550 | |
| Comment: | | | | | | |
| Corrective Action: | | | | 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 | | |
| Comment: | | | | | | |
| Corrective Action: | | | | Date: | | |
| Venting: | | | | | | |
| Yes/No | NO | | | | | |
| Comment: | | | | | | |
| Corrective Action: | | | | | | Date: |
| Flaring: | | | | | | |
| Type | Field Flare | | | | | |
| Comment: | NOT IN USE AT TIME OF INSPECTION | | | | | |

| | | | |
|--------------------|--|-------|--|
| Corrective Action: | | Date: | |
|--------------------|--|-------|--|

Location Construction

Location ID: 333308 CDP: _____

Comment: _____

Corrective Action: _____

Date: _____

Form 2A COAs:

Comment: _____

Corrective Action: _____

Date: _____

Wildlife BMPs:

Comment: _____

Corrective Action: _____

Date: _____

Comment: _____

Corrective Action: _____

Date: _____

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:

Inspected Facilities

Facility ID: 291601 Type: WELL API Number: 123-26094 Status: PR Insp. Status: PR

Idle Well

Purpose: ☒ Shut In ☐ Temporarily Abandoned

Reminder: EQUIPMENT ONSITE

Comment: SI

Corrective Action:

Date:

BradenHead

Comment: PLUMBED TO SURFACE

Corrective Action:

Date:

Facility ID: 291619 Type: WELL API Number: 123-26095 Status: PR Insp. Status: PR

Idle Well

Purpose: ☒ Shut In ☐ Temporarily Abandoned

Reminder: EQUIPMENT ONSITE

Comment: SI

Corrective Action:

Date:

BradenHead

Comment: PLUMBED TO SURFACES

Corrective Action:

Date:

Facility ID: 419387 Type: WELL API Number: 123-32222 Status: PR Insp. Status: PR

Idle Well

Purpose: ☒ Shut In ☐ Temporarily Abandoned

Reminder: EQUIPMENT ONSITE

Comment: SI

Corrective Action:

Date:

BradenHead

Comment: PLUMBED TO SURFACE

Corrective Action:

Date:

Facility ID: 419388 Type: WELL API Number: 123-32223 Status: PR Insp. Status: PR

Idle Well

Purpose: ☒ Shut In ☐ Temporarily Abandoned

Reminder: EQUIPMENT ONSITE

Comment: SI

Corrective Action:

Date:

BradenHead

Comment: PLUMBED TO SURFACE

Corrective Action:

Date:

Facility ID: 423985 Type: WELL API Number: 123-33824 Status: PR Insp. Status: PR

| | | | | |
|------------------------------------------------------|---------------|------------------------------------------------|-------------|------------------------------------------------------------------------|
| <u>Idle Well</u> | | | | |
| Purpose: <input checked="" type="checkbox"/> Shut In | | <input type="checkbox"/> Temporarily Abandoned | | Reminder: EQUIPMENT ONSITE |
| Comment: <u>SI</u> | | | | |
| Corrective Action: | | | Date: | |
| <u>BradenHead</u> | | | | |
| Comment: <u>PLUMBED TO SURFACE</u> | | | | |
| Corrective Action: | | | Date: | |
| | | | | |
| Facility ID: | <u>440132</u> | Type: | <u>WELL</u> | API Number: <u>123-40692</u> Status: <u>DG</u> Insp. Status: <u>DG</u> |
| | | | | |
| Facility ID: | <u>440133</u> | Type: | <u>WELL</u> | API Number: <u>123-40693</u> Status: <u>DG</u> Insp. Status: <u>DG</u> |
| | | | | |
| Facility ID: | <u>440134</u> | Type: | <u>WELL</u> | API Number: <u>123-40694</u> Status: <u>DG</u> Insp. Status: <u>DG</u> |
| | | | | |
| Facility ID: | <u>440135</u> | Type: | <u>WELL</u> | API Number: <u>123-40695</u> Status: <u>PR</u> Insp. Status: <u>PR</u> |
| | | | | |
| <u>Idle Well</u> | | | | |
| Purpose: <input checked="" type="checkbox"/> Shut In | | <input type="checkbox"/> Temporarily Abandoned | | Reminder: EQUIPMENT ONSITE |
| Comment: <u>SI</u> | | | | |
| Corrective Action: | | | Date: | |
| <u>BradenHead</u> | | | | |
| Comment: <u>PLUMBED TO SURFACE</u> | | | | |
| Corrective Action: | | | Date: | |
| | | | | |
| Facility ID: | <u>440136</u> | Type: | <u>WELL</u> | API Number: <u>123-40696</u> Status: <u>DG</u> Insp. Status: <u>DG</u> |
| | | | | |
| Facility ID: | <u>440137</u> | Type: | <u>WELL</u> | API Number: <u>123-40697</u> Status: <u>DG</u> Insp. Status: <u>DG</u> |
| | | | | |
| Facility ID: | <u>440138</u> | Type: | <u>WELL</u> | API Number: <u>123-40698</u> Status: <u>PR</u> Insp. Status: <u>PR</u> |
| | | | | |
| <u>Idle Well</u> | | | | |
| Purpose: <input checked="" type="checkbox"/> Shut In | | <input type="checkbox"/> Temporarily Abandoned | | Reminder: EQUIPMENT ONSITE |
| Comment: <u>SI</u> | | | | |
| Corrective Action: | | | Date: | |
| <u>BradenHead</u> | | | | |
| Comment: <u>PLUMBED TO SURFACE</u> | | | | |
| Corrective Action: | | | Date: | |
| | | | | |
| Facility ID: | <u>440140</u> | Type: | <u>WELL</u> | API Number: <u>123-40700</u> Status: <u>PR</u> Insp. Status: <u>PR</u> |
| | | | | |

Idle WellPurpose: ☒ Shut In ☐ Temporarily Abandoned

Reminder: EQUIPMENT ONSITE

Comment: SI

Corrective Action:

Date:

BradenHead

Comment: PLUMBED TO SURFACE

Corrective Action:

Date:

Facility ID: 440141 Type: WELL API Number: 123-40701 Status: PR Insp. Status: PR

Idle WellPurpose: ☒ Shut In ☐ Temporarily Abandoned

Reminder: EQUIPMENT ONSITE

Comment: SI

Corrective Action:

Date:

BradenHead

Comment: PLUMBED TO SURFACE

Corrective Action:

Date:

Facility ID: 440142 Type: WELL API Number: 123-40702 Status: PR Insp. Status: PR

Idle WellPurpose: ☒ Shut In ☐ Temporarily Abandoned

Reminder: EQUIPMENT ONSITE

Comment: SI

Corrective Action:

Date:

BradenHead

Comment: PLUMBED TO SURFACE

Corrective Action:

Date:

Facility ID: 440143 Type: WELL API Number: 123-40703 Status: PR Insp. Status: PR

Idle WellPurpose: ☒ Shut In ☐ Temporarily Abandoned

Reminder: EQUIPMENT ONSITE

Comment: SI

Corrective Action:

Date:

BradenHead

Comment: PLUMBED TO SURFACE

Corrective Action:

Date:

Facility ID: 440144 Type: WELL API Number: 123-40704 Status: PR Insp. Status: PR

Idle WellPurpose: ☒ Shut In ☐ Temporarily Abandoned

Reminder: EQUIPMENT ONSITE

Comment: SI

Corrective Action: _____

Date: _____

BradenHeadComment: PLUMBED TO SURFACE

Corrective Action: _____

Date: _____

Facility ID: 440145 Type: WELL API Number: 123-40705 Status: DG Insp. Status: DGFacility ID: 440347 Type: WELL API Number: 123-40792 Status: DG Insp. Status: DGFacility ID: 440349 Type: WELL API Number: 123-40794 Status: PR Insp. Status: PR**Idle Well**Purpose: ☒ Shut In ☐ Temporarily Abandoned

Reminder: EQUIPMENT ONSITE

Comment: SI

Corrective Action: _____

Date: _____

BradenHeadComment: PLUMBED TO SURFACE

Corrective Action: _____

Date: _____

Facility ID: 440534 Type: WELL API Number: 123-40894 Status: DG Insp. Status: DG**Well Drilling****Rig:** Rig Name: H&P

Pusher/Rig Manager: _____

Permit Posted: _____

Access Sign: _____

Well Control Equipment:Pipe Ram: YESBlind Ram: YESHydril Type: YESPressure Test BOP: PassTest Pressure PSI: 5000

Safety Plan: _____

YES**Drill Fluids Management:**

Lined Pit: _____

Unlined Pit: _____

Closed Loop: YES

Semi-Closed Loop: _____

Multi-Well: YESDisposal Location: WASTE MANAGEMENT

Comment: _____

Corrective Action: _____

Date: _____

Facility ID: 440535 Type: WELL API Number: 123-40895 Status: DG Insp. Status: DG

Environmental

Spill/Remediation:

Comment:

Corrective
Action:

Date:

Emission Control Burner (ECB): YES

Comment: SI

Pilot: OFF

Wildlife Protection Devices (fired vessels): YES

Reclamation - Storm Water - Pit

Storm Water:

| Loc Erosion BMPs | BMP Maintenance | Lease Road Erosion BMPs | Lease BMP Maintenance | Chemical BMPs | Chemical BMP Maintenance | Comment |
|------------------|-----------------|-------------------------|-----------------------|----------------------------------------|--------------------------|---------|
| Compaction | Pass | | | Covering Materials | Pass | |
| Gravel | Pass | | | Material Handling And Spill Prevention | Pass | |
| Silt Fences | Pass | | | Vehicle Tracking | Pass | |

Comment:

Corrective Action:

Date:

Pits: ☒ NO SURFACE INDICATION OF PIT