

**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:

12/30/2016

Submitted Date:

01/27/2017

Document Number:

672500294**FIELD INSPECTION FORM**
 Loc ID 305447 Inspector Name: Gomez, Jason On-Site Inspection ☐ 2A Doc Num:
Operator Information:OGCC Operator Number: 10633Name of Operator: CRESTONE PEAK RESOURCES OPERATING LLCAddress: 370 17TH STREET #2170City: DENVER State: CO Zip: 80202**Status Summary:**

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

Findings:2 Number of Comments0 Number of Corrective Actions☐ Corrective Action Response Requested**Contact Information:**

Contact Name	Phone	Email	Comment
,		Cogcc.inspections@crestone pr.com	

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
434336	WELL	DG	11/01/2016	LO	123-38107	Woolley Becky 2D-7H-E168	DG
434338	WELL	DG	10/30/2016	LO	123-38109	Woolley Becky 2B-7H-E168	DG
434339	WELL	DG	10/24/2016	LO	123-38110	Woolley Sosa 2E-7H-E168	DG
434340	WELL	DG	10/29/2016	LO	123-38111	Woolley Becky 2A-7H-E168	DG
434341	WELL	DG	11/02/2016	LO	123-38112	Woolley Becky 2E-7H-E168	DG
436731	WELL	DG	10/31/2016	LO	123-39241	Woolley Becky 2C-7H-E168	DG

General Comment:

Inspected FacilitiesFacility ID: 434336 Type: WELL API Number: 123-38107 Status: DG Insp. Status: DG**Well Drilling**

Rig: Rig Name: _____ Pusher/Rig Manager: _____
 Permit Posted: _____ Access Sign: _____

Well Control Equipment:

Pipe Ram: _____ Blind Ram: _____ Hydril Type: _____
 Pressure Test BOP: _____ Test Pressure PSI: _____ Safety Plan: _____

Drill Fluids Management:

Lined Pit: _____ Unlined Pit: _____ Closed Loop: _____ Semi-Closed Loop: _____
 Multi-Well: _____ Disposal Location: _____

Comment: _____

Corrective Action: _____ Date: _____

Facility ID: 434338 Type: WELL API Number: 123-38109 Status: DG Insp. Status: DG**Well Drilling**

Rig: Rig Name: _____ Pusher/Rig Manager: _____
 Permit Posted: _____ Access Sign: _____

Well Control Equipment:

Pipe Ram: _____ Blind Ram: _____ Hydril Type: _____
 Pressure Test BOP: _____ Test Pressure PSI: _____ Safety Plan: _____

Drill Fluids Management:

Lined Pit: _____ Unlined Pit: _____ Closed Loop: _____ Semi-Closed Loop: _____
 Multi-Well: _____ Disposal Location: _____

Comment: _____

Corrective Action: _____ Date: _____

Facility ID: 434339 Type: WELL API Number: 123-38110 Status: DG Insp. Status: DG**Complaint**

Comment: #200441005
on 12-30-2016 no violations of COGCC rules were observed at time of inspection.
Regular drilling activity at time of inspection.

Corrective Action: _____ Date: _____

Well Drilling

Rig: Rig Name: ENSIGN RIG 140 Pusher/Rig Manager: MIKE
 Permit Posted: _____ Access Sign: _____

Well Control Equipment:

Pipe Ram: YES Blind Ram: YES Hydril Type: YES
 Pressure Test BOP: Pass Test Pressure PSI: 5000 Safety Plan: YES

Drill Fluids Management:

Lined Pit: _____ Unlined Pit: _____ Closed Loop: YES Semi-Closed Loop: _____

Multi-Well: <u>YES</u>	Disposal Location: <u>WASTE CONNECTION</u>		
Comment: <input style="width: 90%;" type="text"/>			
Corrective Action: <input style="width: 90%;" type="text"/>			Date: <input style="width: 10%;" type="text"/>

Facility ID: <u>434340</u>	Type: <u>WELL</u>	API Number: <u>123-38111</u>	Status: <u>DG</u>	Insp. Status: <u>DG</u>
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Well Drilling

Rig: Rig Name: _____ Pusher/Rig Manager: _____
 Permit Posted: _____ Access Sign: _____

Well Control Equipment:
 Pipe Ram: _____ Blind Ram: _____ Hydril Type: _____
 Pressure Test BOP: _____ Test Pressure PSI: _____ Safety Plan: _____

Drill Fluids Management:
 Lined Pit: _____ Unlined Pit: _____ Closed Loop: _____ Semi-Closed Loop: _____
 Multi-Well: _____ Disposal Location: _____
 Comment:
 Corrective Action: Date:

Facility ID: <u>434341</u>	Type: <u>WELL</u>	API Number: <u>123-38112</u>	Status: <u>DG</u>	Insp. Status: <u>DG</u>
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Well Drilling

Rig: Rig Name: ENSIGN RIG 140 Pusher/Rig Manager: MIKE
 Permit Posted: _____ Access Sign: _____

Well Control Equipment:
 Pipe Ram: YES Blind Ram: YES Hydril Type: YES
 Pressure Test BOP: Pass Test Pressure PSI: _____ Safety Plan: YES

Drill Fluids Management:
 Lined Pit: _____ Unlined Pit: _____ Closed Loop: YES Semi-Closed Loop: _____
 Multi-Well: YES Disposal Location: WASTE CONNECTION
 Comment:
 Corrective Action: Date:

Facility ID: <u>436731</u>	Type: <u>WELL</u>	API Number: <u>123-39241</u>	Status: <u>DG</u>	Insp. Status: <u>DG</u>
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Well Drilling

Rig: Rig Name: _____ Pusher/Rig Manager: _____
 Permit Posted: _____ Access Sign: _____

Well Control Equipment:
 Pipe Ram: _____ Blind Ram: _____ Hydril Type: _____
 Pressure Test BOP: _____ Test Pressure PSI: _____ Safety Plan: _____

Drill Fluids Management:
 Lined Pit: _____ Unlined Pit: _____ Closed Loop: _____ Semi-Closed Loop: _____
 Multi-Well: _____ Disposal Location: _____
 Comment:

Corrective Action:		Date:	
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Reclamation - Storm Water - Pit**Storm Water:**

Loc Erosion BMPs	BMP Maintenance	Lease Road Erosion BMPs	Lease BMP Maintenance	Chemical BMPs	Chemical BMP Maintenance	Comment
Gravel	Pass			Vehicle Tracking	Pass	
Rip Rap	Pass					
Compaction	Pass	Compaction	Pass	Covering Materials	Pass	
Ditches	Pass			Material Handling And Spill Prevention	Pass	
Waddles	Pass					

Comment: Corrective Action: Date: **Pits:** ☒ NO SURFACE INDICATION OF PIT**COGCC Comments**

Comment	User	Date
No violations of COGCC rules observed at time of inspection.	gomezj	01/27/2017