

**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:

02/22/2017

Submitted Date:

02/23/2017

Document Number:

680401166**FIELD INSPECTION FORM**

Loc ID 335534 Inspector Name: BROWNING, CHUCK On-Site Inspection ☐ 2A Doc Num: _____

Operator Information:OGCC Operator Number: 10447Name of Operator: URSA OPERATING COMPANY LLCAddress: 792 BUCKHORN DRCity: RIFLE State: CO Zip: 81650**Status Summary:**

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

Findings:9 Number of Comments0 Number of Corrective Actions☐ Corrective Action Response Requested**Contact Information:**

Contact Name	Phone	Email	Comment
Browning, Chuck	970-433-4139	chuck.browning@state.co.us	Field Inspector
Lind, Jennifer	720-508-8362	jlind@ursaresources.com	All Inspections
Knudson, Dwayne	970-625-9922	dknudson@ursaresources.com	All Inspections

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
284083	WELL	PR	11/21/2009	GW	045-12083	VALLEY FARMS D1	PR
284084	WELL	SI	07/09/2015	DSPW	045-12082	VALLEY FARMS D3	SI
288635	WELL	PR	06/25/2013	GW	045-13298	VALLEY FARMS D10	PR
290434	WELL	PR	06/25/2013	GW	045-14109	VALLEY FARMS D13	PR

General Comment:

Routine UIC Inspection.

Location**Lease Road:**

Type	Access		
comment:			
Corrective Action		Date:	
Type	Main		
comment:			
Corrective Action		Date:	

Overall Good: ☒**Signs/Marker:**

Type	WELLHEAD		
Comment:			
Corrective Action:		Date:	
Type	TANK LABELS/PLACARDS		
Comment:			
Corrective Action:		Date:	

Emergency Contact Number:

Comment:		
Corrective Action:		Date: _____

Overall Good: ☒**Spills:**

Type	Area	Volume		
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In Containment: No

Comment: ☐ Multiple Spills and Releases?**Fencing/:**

Type	WELLHEAD		
Comment:	Panel Fence		
Corrective Action:		Date:	

Equipment:

Type: Horizontal Heater Treater	# 1		corrective date
Comment:			
Corrective Action:		Date:	

Tanks and Berms:

Contents	#	Capacity	Type	Tank ID	SE GPS
PRODUCED WATER	2	300 BBLS	STEEL AST		39.531256,-107.652558
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	
PRODUCED WATER	6	300 BBLs	STEEL AST		39.530919,-107.652761	
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			
Comment:			
Corrective Action:			Date:

Inspected FacilitiesFacility ID: 284083 Type: WELL API Number: 045-12083 Status: PR Insp. Status: PR**Producing Well**Comment: Plunger Lift

Corrective Action:

Date:

Facility ID: 284084 Type: WELL API Number: 045-12082 Status: SI Insp. Status: SI**Underground Injection Control**

UIC Violation: _____

Maximum Injection Pressure: _____

UIC RoutineInj./Tube: Pressure or inches of Hg 14 Previous Test Pressure _____ MPP _____
(e.g. 30 psig or -30" Hg) Inj Zone: CZ-CRTC: Pressure or inches of Hg 1750 Previous Test Pressure _____ Last MIT: 06/08/2015Brhd: Pressure or inches of Hg 90 Previous Test Pressure _____ AnnMTReq: _____Comment: Routine UIC Inspection. Well shut in. No active injection at time of inspection.

Corrective Action:

Date:

Method of Injection: PUMP FEED

Test Type: _____ Tbg psi: _____ Csg psi: _____ BH psi: _____

Insp. Status: _____

Comment:

Corrective Action:

Date:

Facility ID: 288635 Type: WELL API Number: 045-13298 Status: PR Insp. Status: PR**Producing Well**Comment: Plunger Lift

Corrective Action:

Date:

Facility ID: 290434 Type: WELL API Number: 045-14109 Status: PR Insp. Status: PR**Producing Well**Comment: Plunger Lift

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
Gravel	Pass	Ditches	Pass			
Berms	Pass	Gravel	Pass	Material Handling And Spill Prevention	Pass	

Comment: 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
401217612	INSPECTION SUBMITTED	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4082634