

**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:

05/30/2017

Submitted Date:

05/30/2017

Document Number:

674005243**FIELD INSPECTION FORM**

Loc ID 444819 Inspector Name: Carlile, Craig On-Site Inspection ☐ 2A Doc Num: _____

Operator Information:OGCC Operator Number: 10542Name of Operator: CUB CREEK ENERGYAddress: 200 PLAZA DRIVE SUITE 100City: HIGHLANDS State: CO Zip: 80129**Status Summary:**

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

Findings:12 Number of Comments0 Number of Corrective Actions☐ Corrective Action Response Requested**Contact Information:**

Contact Name	Phone	Email	Comment
Baily, Scott		scott.baily@cub-creek.com	
Gardner, Bob		bob.gardner@cub-creek.com	

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
444821	WELL	DG	05/20/2017		123-42770	Litzenberger 10	DG
444822	WELL	DG	05/21/2017		123-42771	Litzenberger 12	DG
444824	WELL	DG	05/20/2017		123-42773	Litzenberger 9	DG
444829	WELL	DG	05/18/2017		123-42778	Litzenberger 6	DG
444831	WELL	DG	05/19/2017		123-42780	Litzenberger 7	DG
444832	WELL	DG	05/22/2017		123-42781	Litzenberger 11	DG
444833	WELL	DG	05/17/2017		123-42782	Litzenberger 5	DG
444835	WELL	DG	05/16/2017		123-42784	Litzenberger 4	DG

General Comment:

LocationOverall Good: ☒**Signs/Marker:**

Type	OTHER		
Comment:	Location Entrance		
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	OTHER		
Comment:	Sound Walls		
Corrective Action:		Date:	

Venting:

Yes/No			
Comment:			
Corrective Action:		Date:	

Flaring:

Type		
Comment:		
Corrective Action:		Date:

Inspected Facilities

Facility ID: 444821 Type: WELL API Number: 123-42770 Status: DG Insp. Status: DG

Well Drilling

Rig: Rig Name: Xtreme 18 Pusher/Rig Manager: _____
 Permit Posted: Yes Access Sign: Yes

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: Surface casing set.
 Corrective Action: _____ Date: _____

Facility ID: 444822 Type: WELL API Number: 123-42771 Status: DG Insp. Status: DG

Well Drilling

Rig: Rig Name: Xtreme 18 Pusher/Rig Manager: _____
 Permit Posted: Yes Access Sign: Yes

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: Surface casing set.
 Corrective Action: _____ Date: _____

Facility ID: 444824 Type: WELL API Number: 123-42773 Status: DG Insp. Status: DG

Well Drilling

Rig: Rig Name: Xtreme 18 Pusher/Rig Manager: _____
 Permit Posted: Yes Access Sign: Yes

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: Surface casing set
 Corrective Action: _____ Date: _____

Facility ID: 444829 Type: WELL API Number: 123-42778 Status: DG Insp. Status: DG

Well Drilling

Rig: Rig Name: Xtreme 18 Pusher/Rig Manager: _____
 Permit Posted: Yes Access Sign: Yes

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: Surface casing set

Corrective Action: _____ Date: _____

Facility ID: 444831 Type: WELL API Number: 123-42780 Status: DG Insp. Status: DG

Well Drilling

Rig: Rig Name: Xtreme 18 Pusher/Rig Manager: _____
 Permit Posted: Yes Access Sign: Yes

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: Surface casing set.

Corrective Action: _____ Date: _____

Facility ID: 444832 Type: WELL API Number: 123-42781 Status: DG Insp. Status: DG

Well Drilling

Rig: Rig Name: Xtreme 18 Pusher/Rig Manager: _____
 Permit Posted: Yes Access Sign: Yes

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: _____ Disposal Location: Hertke Holstein Farms

Comment: Water based mud in use.

Corrective Action: _____ Date: _____

Cement**Cement Contractor**

Contractor Name: _____ Contractor Phone: _____

Surface Casing

Cement Volume (sx): _____

Circulate to Surface: _____

Cement Fall Back: _____

Top Job, 1" Volume: _____

Intermediate Casing

Cement Volume (sxs): _____

Good Return During Job: _____

Production Casing

Cement Volume (sx): _____

Good Return During Job: YESPlugging Operations

Depth Plugs(feet range): _____

Cement Volume (sx): _____

Good Return During Job: _____

Cement Type: _____

Comment: [Cement of production casing underway at time of inspection. Disposal bins on location, see photos.](#)

Corrective Action: _____

Date: _____

Facility ID: 444833 Type: WELL API Number: 123-42782 Status: DG Insp. Status: DG

Well Drilling**Rig:** Rig Name: Xtreme 18

Pusher/Rig Manager: _____

Permit Posted: YesAccess Sign: Yes**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: [Surface casing set.](#)

Corrective Action: _____

Date: _____

Facility ID: 444835 Type: WELL API Number: 123-42784 Status: DG Insp. Status: DG

Well Drilling**Rig:** Rig Name: Xtreme 18

Pusher/Rig Manager: _____

Permit Posted: YesAccess Sign: Yes**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: [Surface casing set.](#)

Corrective Action: _____

Date: _____

COGCC Comments

Comment	User	Date
Drilling location inspection. Company representative on location Siji Chaparro Location surrounded be sound walls. Silt fence and ditching allog north side photo attached.	carlilec	05/30/2017

Attached Documents

You can go to COGCC Images (<https://cogcc.state.co.us/weblink/>) and search by document number:

Document Num	Description	URL
674005244	Photos	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4157879