

**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:

06/01/2017

Submitted Date:

06/01/2017

Document Number:

684903819**FIELD INSPECTION FORM**Loc ID 448269 Inspector Name: Pesicka, Conor On-Site Inspection ☐ 2A Doc Num: _____**Operator Information:**OGCC Operator Number: 10454Name of Operator: PETROSHARE CORPORATIONAddress: 9635 MAROON CIRCLE #400City: ENGLEWOOD State: CO Zip: 80112**Status Summary:**

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

Findings:3 Number of Comments0 Number of Corrective Actions☐ Corrective Action Response Requested**Contact Information:**

Contact Name	Phone	Email	Comment
Powell, Harold	(918)-774-3120	hpowell@petrosharecorp.com	Field Op Manager
Lloyd, Bill		blloyd@petrosharecorp.com	Operations Manager
Adamczyk, Megan		megan.adamczyk@state.co.us	

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
447676	WELL	DG	04/03/2017		001-09968	Shook 3-10-1CDH	DG

General Comment:

Inspected FacilitiesFacility ID: 447676 Type: WELL API Number: 001-09968 Status: DG Insp. Status: DG**Complaint**Comment: [Complaint #: 20442754](#)

Field Inspector Assigned: C Pesicka

Well Number: 05- Location #: 448269

Inspection Document #: 684903819

Nature of complaint: Sound

If Sound GPS Coordinates of Survey Location:

Inspection Observations:

An inspection of the above location was conducted with focus on sound. Wind conditions were in excess of 5 mph by anemometer, so a sound study could not be performed.

Corrective Action:

Date:

Well Drilling

Rig: Rig Name: Ensign 145 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: _____ Safety Plan: YES

Drill Fluids Management:

Lined Pit: _____ Unlined Pit: _____ Closed Loop: YES Semi-Closed Loop: _____
 Multi-Well: YES Disposal Location: Front Range Landfill

Comment: _____

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
Silt Fences	Pass			Covering Materials	Pass	
Berms	Pass			Material Handling And Spill Prevention	Pass	
Gravel	Pass	Gravel	Pass	Vehicle Tracking	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
401298537	INSPECTION SUBMITTED	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4161069