

**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:

06/22/2017

Submitted Date:

06/22/2017

Document Number:

666803287

FIELD INSPECTION FORM

Loc ID 323982 Inspector Name: Murray, Richard On-Site Inspection 2A Doc Num: _____

Status Summary:

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

Operator Information:

OGCC Operator Number: 10531
Name of Operator: VANGUARD OPERATING LLC
Address: 5847 SAN FELIPE #3000
City: HOUSTON State: TX Zip: 77057

Findings:

7 Number of Comments
0 Number of Corrective Actions
 Corrective Action Response Requested

Contact Information:

| Contact Name | Phone | Email | Comment |
|----------------|--------------|--------------------|------------------------|
| Axelson, Aaron | 970-230-0926 | aaxelson@vnrlc.com | Sr. Production Foreman |
| Ghan, Scott | | sghan@vnrlc.com | Sr. EH&S |

Inspected Facilities:

| Facility ID | Type | Status | Status Date | Well Class | API Num | Facility Name | Insp Status |
|-------------|------|--------|-------------|------------|-----------|------------------------|-------------|
| 211403 | WELL | PR | 07/27/1997 | GW | 045-07163 | GIBSON GULCH UNIT 3-31 | PR |

General Comment:

(This area is intentionally left blank for general comments.)

Location

Overall Good:

Emergency Contact Number:

Comment:

Corrective Action:

Date: _____

Overall Good:

Spills:

| Type | Area | Volume | | | |
|------|------|--------|--|--|--|
| | | | | | |

In Containment: No

Comment:

Multiple Spills and Releases?

Equipment:

| Type | # | Comment | Corrective Action | Date | corrective date |
|-----------------------------------|-----|--|--------------------|-------|-----------------|
| Type: Plunger Lift | # 1 | Comment: 39.489767/-107.596539 | Corrective Action: | Date: | |
| Type: Horizontal Heated Separator | # 1 | Comment: 39.489585/-107.596359 | Corrective Action: | Date: | |
| Type: Flow Line | # | Comment: In use;1-2" steel risers at wellhead, 3-2" risers at separators, 1-2" risers at tanks, 1-2", 1-3" risers at gas meter run, 1-1/4" gas feed to ECB | Corrective Action: | Date: | |
| Type: Gas Meter Run | # 1 | Comment: 39.489552/-107.596267 | Corrective Action: | Date: | |

Tanks and Berms:

| Contents | # | Capacity | Type | Tank ID | SE GPS |
|--------------------|----------------------|----------|-----------|---------|-----------------------|
| CONDENSATE | 1 | 300 BBLs | STEEL AST | | 39.489741,-107.596147 |
| Comment: | <input type="text"/> | | | | |
| Corrective Action: | <input type="text"/> | | | | Date: |

Paint

| | |
|------------------|----------------------|
| Condition | Adequate |
| Other (Content) | <input type="text"/> |
| Other (Capacity) | <input type="text"/> |
| Other (Type) | <input type="text"/> |

Berms

| Type | Capacity | Permeability (Wall) | Permeability (Base) | Maintenance |
|--------------------|----------------------|---------------------|---------------------|-------------|
| Earth | Adequate | Walls Sufficient | Base Sufficient | Adequate |
| Comment: | <input type="text"/> | | | |
| Corrective Action: | <input type="text"/> | | | |
| | | | | Date: |

| | | | |
|--------------------|----|-------|--|
| Venting: | | | |
| Yes/No | NO | | |
| Comment: | | | |
| Corrective Action: | | Date: | |

| | | | |
|--------------------|--|-------|--|
| Flaring: | | | |
| Type | | | |
| Comment: | | | |
| Corrective Action: | | Date: | |

Inspected Facilities

Facility ID: 211403 Type: WELL API Number: 045-07163 Status: PR Insp. Status: PR

Producing Well

Comment: [Producing](#)

Corrective Action:

Date:

Environmental

Spill/Remediation:

Comment:

Corrective Action: Date:

Emission Control Burner (ECB): NO

Comment:

Pilot: 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 |
|------------------|-----------------|-------------------------|-----------------------|---------------|--------------------------|---------|
| Gravel | Pass | | | | | |
| | | Compaction | Pass | | | |

Comment:

Corrective Action:

Date: _____

Pits: NO SURFACE INDICATION OF PIT