| 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 **FIELD INSPECTION FORM** | DNR CO | Inspection Date: 03/28/2018 Submitted Date: 04/11/2018 Document Number: 680001615 |

| Loc ID 314001 | Inspector Name: QUINT, CRAIG | On-Site Inspection ☐ 2A Doc Num: | **Status Summary:** |

Status Summary:

☐ THIS IS A FOLLOW UP INSPECTION

☐ FOLLOW UP INSPECTION REQUIRED

☐ NO FOLLOW UP INSPECTION REQUIRED

Operator Information:

OGCC Operator Number: 10657

Name of Operator: PCR OPERATING LLC

Address: 4040 BROADWAY STREET #510

City: SAN ANTONIO   State: TX   Zip: 78209

Findings:

9   Number of Comments

0   Number of Corrective Actions

☐ Corrective Action Response Requested

Contact Information:

Contact Name	Phone	Email	Comment
Wehrer, Gene	(970) 380-4860	gwehrer@passcreekresources.com	Adena Inspections

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
269776	WELL	SI	07/01/2017	GW	095-06070	SCHLACHTER 13-22	SI

General Comment:

Routine inspection

Inspector Name: QUINT, CRAIG

Location			
Lease Road:			
Type	Access		
comment:	2 Track through pasture		
Corrective ActionL		Date:	

Overall Good: ☐

Signs/Marker:			
Type	BATTERY		
Comment:	Lease sign mounted on meter shed		
Corrective Action:		Date:	
Type	WELLHEAD		
Comment:	Lease sign by well		
Corrective Action:		Date:	

Emergency Contact Number:			
Comment:			
Corrective Action:		Date:	

Overall Good: ☒

Spills:				
Type	Area	Volume		

In Containment: No

Comment:

☐ Multilple Spills and Releases?

Equipment:			corrective date
Type: Vertical Separator	# 1		
Comment:	In meter shed		
Corrective Action:		Date:	
Type: Gas Meter Run	# 1		
Comment:			
Corrective Action:		Date:	

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

Flaring:			
Type			
Comment:			
Corrective Action:		Date:	

Location Construction

Location ID: 269776   CDP: _____

Comment: _____

Corrective Action: _____   **Date:** _____

Form 2A COAs:

Comment: No issues observed

Corrective Action: _____   **Date:** _____

Wildlife BMPs:

Comment: _____

Corrective Action: _____   **Date:** _____

Comment: _____

Corrective Action: _____   **Date:** _____

On Site Inspection (305):

Surface Owner Contact Information:

Name: _____   Address: _____

Phone Number: _____   Cell Phone: _____

Operator Rep. Contact Information:

Landman Name: _____   Phone Number: _____

Date Onsite Request Received: _____   Date of Rule 306 Consultation: _____

Request LGD Attendance: _____

LGD Contact Information:

Name: _____   Phone Number: _____   Agreed to Attend: _____

Summary of Landowner Issues:

_____

Summary of Operator Response to Landowner Issues:

_____

Onsite Inspection Memorandum Summarizing Discussions at Inspection as Attachment:

_____

Inspected Facilities

Facility ID:	269776	Type:	WELL	API Number:	095-06070	Status:	SI	Insp. Status:	SI

Idle Well

Purpose: ☒ Shut In ☐ Temporarily Abandoned Reminder: _____

Comment: Shut in, No production since June 2017.

Corrective Action: _____ Date: _____

Reclamation - Storm Water - Pit

Interim Reclamation:

Date Interim Reclamation Started: _____   Date Interim Reclamation Completed: _____

Land Use: _____

Comment: [   ]

1002 SITE PREPARATION AND STABILIZATION

1002a. FENCING _____

Comment [   ]

Corrective Action [   ]   Date _____

1002b. SOIL REMOVAL AND
        SEGREGATION _____

Comment [   ]

Corrective Action [   ]   Date _____

1002c. PROTECTION OF SOILS _____

Comment [   ]

Corrective Action [   ]   Date _____

1002E. SURFACE DISTRURBANCE MINIMIZATION _____

Comment [   ]

Corrective Action [   ]   Date _____

1003a. Waste and Debris removed?   Pass _____

Comment [   ]

Corrective Action [   ]   Date _____

Unused or unneeded equipment onsite?   Pass _____

Comment [   ]

Corrective Action [   ]   Date _____

Pit, cellars, rat holes and other bores closed?   Pass _____

Comment [   ]

Corrective Action [   ]   Date _____

Guy line anchors marked? _____

Comment [   ]

Corrective Action [   ]   Date _____

1003b. Area no longer in use? _____   Production areas stabilized ? _____

1003c. Compacted areas have been cross ripped? _____

1003d. Drilling pit closed? _____   Subsidence over on drill pit? _____

    Cuttings management: _____

1003e. Areas no longer needed for drilling or subsequent operations for have been re-vegetated to 80% of pre-existing? _____

    Production areas have been stabilized? _____   Segregated soils have been replaced? _____

    RESTORATION AND REVEGETATION

    Cropland

      Top soil replaced _____   Recontoured _____   Perennial forage re-established _____

    Non-Cropland

      Top soil replaced _____   Recontoured _____   80% Revegetation _____

1003e. INTERIM VEGETATION TRANSECT

    TRANSECT RESULTS OF DISTURBED AREA% _____

    TRANSECT RESULTS OF REFERENCE AREA% _____

    TOTAL % OF DESIRABLE VEGETATION COVER _____

    VEGETATIVE COVER _____

1003 f. Weeds Noxious weeds? _____

    Comment [_____]

Corrective Action [_____]   Date _____

Overall Interim Reclamation _____

Final Reclamation/ Abandoned Location:

Date Final Reclamation Started: _____   Date Final Reclamation Completed: _____

Final Land Use: _____

    Reminder: _____

    Comment: [_____]

Well plugged _____   Pit mouse/rat holes, cellars backfilled _____

Debris removed _____   No disturbance /Location never built _____

Access Roads   Regraded _____   Contoured _____   Culverts removed _____

    Gravel removed _____

Location and associated production facilities reclaimed _____   Locations, facilities, roads, recontoured _____

Compaction alleviation _____   Dust and erosion control _____

    Non cropland: Revegetated 80% _____   Cropland: perennial forage _____

Weeds present _____   Subsidence _____

1004.d. FINAL VEGETATION TRANSECT

    TRANSECT RESULTS OF DISTURBED AREA% _____

    TRANSECT RESULTS OF REFERENCE AREA% _____

    TOTAL % OF DESIRABLE VEGETATION COVER _____

    VEGETATIVE COVER _____

    Comment: [_____]

Corrective Action: [_____]   Date _____

Overall Final Reclamation _____   Well Release on Active Location ☐   Multi-Well Location ☐

Inspector Name: QUINT, CRAIG

<u>Storm Water:</u>

Loc Erosion BMPs	BMP Maintenance	Lease Road Erosion BMPs	Lease BMP Maintenance	Chemical BMPs	Chemical BMP Maintenance	Comment
Compaction	Pass	Compaction	Pass			

Comment: Access and unused areas of the location are partially grassed over.

Corrective Action: Date: _____

Pits: ☒ NO SURFACE INDICATION OF PIT