

**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:

10/09/2019

Submitted Date:

10/16/2019

Document Number:

697500697

FIELD INSPECTION FORM

Loc ID 462025 Inspector Name: Binschus, Chris On-Site Inspection ☐ 2A Doc Num: _____

Operator Information:

OGCC Operator Number: 10071

Name of Operator: HIGHPOINT OPERATING CORPORATION

Address: 555 17TH ST STE 3700

City: DENVER State: CO Zip: 80202

Status Summary:☐ THIS IS A FOLLOW UP INSPECTION☒ FOLLOW UP INSPECTION REQUIRED☐ NO FOLLOW UP INSPECTION REQUIRED**Findings:**

2 Number of Comments

0 Number of Corrective Actions

☐ Corrective Action Response Requested

**ANY CORRECTIVE ACTION(S) FROM
PREVIOUS INSPECTIONS THAT HAVE NOT
BEEN ADDRESSED ARE STILL APPLICABLE**

Contact Information:

Contact Name	Phone	Email	Comment
James, Brian		bjames@hpres.com	
Crowton, Curtis		djdrillingsuper@hpres.com	

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
462025	LOCATION	AC	02/13/2019		-	Grinde 1-64-5_4 PF	CI

General Comment:

This is a Construction and Stormwater Inspection in response to Form 42: Notice of construction- Document #402193743. Notice of construction start date was 10/3/2019.

Location Construction

Location ID: 462025 CDP: _____

Comment: At the time of this inspection, Operator had not yet started construction activities due to potential delays from a nearby pipeline ROW. Per the COGCC Operator Guidance for Rule 316C.c., Operator should submit a revised Form 42-Update for a change greater than 5 days.

Corrective Action: _____ Date: _____

Form 2A COAs:

Comment: _____

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:	462025	Type:	LOCATION	API Number:	-	Status:	AC	Insp. Status:	CI

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