

**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: _____

Status Summary:

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

Operator Information:

OGCC Operator Number: 10071
Name of Operator: HIGHPOINT OPERATING CORPORATION
Address: 555 17TH ST STE 3700
City: DENVER State: CO Zip: 80202

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