

**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:

09/03/2020

Submitted Date:

09/03/2020

Document Number:

697002010

FIELD INSPECTION FORMLoc ID 306199 Inspector Name: Peterson, Tom On-Site Inspection ☐ 2A Doc Num: _____**Operator Information:**

OGCC Operator Number: 10459

Name of Operator: EXTRACTION OIL & GAS INC

Address: 370 17TH STREET SUITE 5300

City: DENVER State: CO Zip: 80202

Status Summary:

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

Findings:

6 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
,		COGCCInspections@extracti onog.com	

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
286416	WELL	SI	12/01/2018	GW	123-24187	PERKINS 29-43	SI

General Comment:

LocationOverall Good: ☒

Signs/Marker:			
Type	WELLHEAD		
Comment:			
Corrective Action:		Date:	
Type	BATTERY		
Comment:			
Corrective Action:		Date:	
Type	TANK LABELS/PLACARDS		
Comment:			
Corrective Action:		Date:	

Emergency Contact Number:

Comment:

Corrective Action:

Date: _____

Overall Good: ☒

Spills:			
Type	Area	Volume	

In Containment: No

Comment:

☐ Multiple Spills and Releases?

Fencing/:			
Type	WELLHEAD		
Comment:	Panel		
Corrective Action:		Date:	

Equipment:			corrective date
Type: Gas Meter Run	# 2		
Comment:	Calibration cards noted in prior inspection document #697001846 have been updated. See attached photos.		
Corrective Action:		Date:	
Type: Plunger Lift	# 1		
Comment:			
Corrective Action:		Date:	
Type: Bradenhead	# 1		
Comment:	Bradenhead valve is exposed at surface.		
Corrective Action:		Date:	
Type: Ancillary equipment	# 2		
Comment:	Automation array and ECD scrubber		
Corrective Action:		Date:	
Type: Emission Control Device	# 1		

Comment:		Date:	
Corrective Action:		Date:	
Type: Horizontal Heated Separator	# 2		
Comment:		Date:	
Corrective Action:		Date:	
Type: Pig Station	# 1		
Comment:		Date:	
Corrective Action:		Date:	
Type: Bird Protectors	# 3		
Comment:		Date:	
Corrective Action:		Date:	

Tanks and Berms:

Contents	#	Capacity	Type	Tank ID	SE GPS
PRODUCED WATER	1	<100 BBLs	PBV FIBERGLASS		,
Comment:	80 bbls				
Corrective Action:				Date:	

Paint

Condition	Adequate
Other (Content)	
Other (Capacity)	
Other (Type)	

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Metal	Adequate	Walls Sufficient	Base Sufficient	Adequate
Comment:				
Corrective Action:			Date:	

Contents	#	Capacity	Type	Tank ID	SE GPS
PRODUCED WATER	1	<50 BBLs	BV CONCRETE		,
Comment:	48 bbls				
Corrective Action:				Date:	

Paint

Condition	Adequate
Other (Content)	
Other (Capacity)	
Other (Type)	

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Metal	Adequate	Walls Sufficient	Base Sufficient	Adequate
Comment:				
Corrective Action:			Date:	

Inspector Name: Peterson, Tom

Contents	#	Capacity	Type	Tank ID	SE GPS	
CRUDE OIL	4	300 BBLS	STEEL AST		,	
Comment:						
Corrective Action:						Date:
<u>Paint</u>						
Condition	Adequate					
Other (Content)						
Other (Capacity)						
Other (Type)						
<u>Berms</u>						
Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance		
Metal	Adequate	Walls Sufficent	Base Sufficent	Adequate		
Comment:						
Corrective Action:						Date:
<u>Venting:</u>						
Yes/No	NO					
Comment:						
Corrective Action:						Date:
<u>Flaring:</u>						
Type						
Comment:						
Corrective Action:						Date:

Inspected Facilities									
Facility ID:	286416	Type:	WELL	API Number:	123-24187	Status:	SI	Insp. Status:	SI
Idle Well									
Purpose: <input checked="" type="checkbox"/> Shut In <input type="checkbox"/> Temporarily Abandoned Reminder: _____									
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
Gravel	Pass	Gravel	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
697002013	Photos	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=5238961