

**FORM
INSP**Rev
X/20**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:

10/21/2021

Submitted Date:

11/10/2021

Document Number:

689806570

FIELD INSPECTION FORMLoc ID 312938 Inspector Name: Waldron, Emily On-Site Inspection ☐ 2A Doc Num: _____**Operator Information:**

OGCC Operator Number: 10407

Name of Operator: ANTLER ENERGY LLC

Address: PO BOX 104

City: BAGGS State: WY Zip: 82321

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

8 Number of Comments

5 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 |
|--------------|-------|----------------------------------|---------|
| | | dnr_cogccengineering@state.co.us | |
| Evans, Clay | | antlerenergy@yahoo.com | |

Inspected Facilities:

| Facility ID | Type | Status | Status Date | Well Class | API Num | Facility Name | Insp Status |
|-------------|------|--------|-------------|------------|-----------|--------------------------|-------------|
| 222936 | WELL | PR | 08/01/2018 | GW | 081-06298 | ROSS-GOVERNMENT-USA 43-7 | SI |

General Comment:

Routine FIU inspection. Compliance issues observed:
 no bradenhead access apparent
 equipment stored and debris on location
 Form 7 reporting inaccurate
 no pit permit on file

LocationOverall Good: ☐

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

Emergency Contact Number:

Comment: 307-380-7616

Corrective Action:

Date: _____

Good Housekeeping:

| | | | |
|--------------------|----------------------------|-------|------------|
| Type | DEBRIS | | |
| Comment: | Debris on location. | | |
| Corrective Action: | Comply with Rule 606. | Date: | 12/10/2021 |
| Type | STORAGE OF SUPL | | |
| Comment: | Tubing stored on location. | | |
| Corrective Action: | Comply with Rule 606. | Date: | 12/10/2021 |

Overall Good: ☐

| | | | | |
|--|------|--------|--|--|
| Spills: | | | | |
| Type | Area | Volume | | |
| In Containment: No | | | | |
| Comment: _____ | | | | |
| <input type="checkbox"/> Multiple Spills and Releases? | | | | |

| | | | |
|--------------------|-----|-------|--|
| Fencing/: | | | |
| Type | PIT | | |
| Comment: | | | |
| Corrective Action: | | Date: | |

| | | | |
|-----------------------------------|-----|-------|-----------------|
| Equipment: | | | corrective date |
| Type: Pump Jack | # 1 | | |
| Comment: | | | |
| Corrective Action: | | Date: | |
| Type: Horizontal Heated Separator | # 1 | | |
| Comment: | | | |
| Corrective Action: | | Date: | |

| | | | |
|-----------------------|---|--|------------------|
| Type: Bird Protectors | # | | |
| Comment: | | | |
| Corrective Action: | | | Date: |
| Type: Bradenhead | # | | |
| Comment: | Bradenhead inaccessible or not visible. | | |
| Corrective Action: | Install appropriate fittings to allow bradenhead visual inspection as per Rule 419.a.(1), (2) | | Date: 11/22/2021 |

Tanks and Berms:

| | | | | | |
|--------------------|---|----------|------------------|---------|--------|
| Contents | # | Capacity | Type | Tank ID | SE GPS |
| CRUDE OIL | 2 | 300 BBLS | HEATED STEEL AST | | , |
| Comment: | | | | | |
| Corrective Action: | | | | | Date: |

Paint

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

Berms

| | | | | |
|--------------------|----------|---------------------|---------------------|-------------|
| Type | Capacity | Permeability (Wall) | Permeability (Base) | Maintenance |
| Earth | Adequate | | | Adequate |
| Comment: | | | | |
| Corrective Action: | | | | Date: |

| | | | | | |
|--------------------|---|----------|------------------|---------|--------|
| Contents | # | Capacity | Type | Tank ID | SE GPS |
| PRODUCED WATER | 2 | 300 BBLS | HEATED STEEL AST | | , |
| Comment: | | | | | |
| Corrective Action: | | | | | |
| Corrective Action: | | | | | |
| Corrective Action: | | | | | |

Paint

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

Berms

| | | | | |
|--------------------|----------|---------------------|---------------------|-------------|
| Type | Capacity | Permeability (Wall) | Permeability (Base) | Maintenance |
| Earth | Adequate | | | Adequate |
| Comment: | | | | |
| Corrective Action: | | | | Date: |

Venting:

| | | |
|----------|----|--|
| Yes/No | NO | |
| Comment: | | |

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

Inspected FacilitiesFacility ID: 222936 Type: WELL API Number: 081-06298 Status: PR Insp. Status: SI**Idle Well**Purpose: ☐ Shut In ☐ Temporarily Abandoned

Reminder: _____

Comment: Produced volumes are required to be reported accurately from the wellhead meter every month, and the form 7 reporting does not reflect that accurate measurement.

Corrective Action: Submit required Form 7(s) to COGCC per rule 413.

Date: 12/23/2019

Reclamation - Storm Water - Pit**Storm Water:**

| Loc Erosion BMPs | BMP Maintenance | Lease Road Erosion BMPs | Lease BMP Maintenance | Chemical BMPs | Chemical BMP Maintenance | Comment |
|------------------|-----------------|-------------------------|-----------------------|---------------|--------------------------|---------|
| | | | | | | |

Comment: No stormwater BMPs observed. No apparent soil migration; erosion or soil movement.

Corrective Action:

Date: _____

Pits: ☐ NO SURFACE INDICATION OF PIT

| Type: | Lined: | Pit ID: | Lat: | Long: |
|------------------------|--------------|---------------|--------------|-------|
| Reference Point: _____ | Other: _____ | Length: _____ | Width: _____ | |

Lining:

Liner Type: _____ Liner Condition: _____

Comment:

Corrective Action

Date:

Fencing:Fencing Type: LivestockFencing Condition: Adequate

Comment:

Corrective Action

Date:

Netting:

Netting Type: _____ Netting Condition: _____

Comment:

Corrective Action

Date:

Anchor Trench Present:

Oil Accumulation:

2+ feet Freeboard:

Comment: No pit permit on file.

Corrective Action

Submit an eForm 15 Pit Report to update COGCC records with current information to comply with rule 908.Date: 11/25/2021**Attached Documents**You can go to COGCC Images (<https://cogcc.state.co.us/weblink/>) and search by document number:

| Document Num | Description | URL |
|--------------|-------------------|---|
| 689806571 | Inspection Photos | http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=5576993 |