

FORM INSP
Rev 05/11

**State of Colorado
Oil and Gas Conservation Commission**

1120 Lincoln Street, Suite 801, Denver, Colorado 80205 Phone: (303) 894-2100 Fax: (303) 894-2109



DE	ET	OE	ES
----	----	----	----

Inspection Date:
12/19/2011

Document Number:
664000229

Overall Inspection:
Satisfactory

FIELD INSPECTION FORM

Location Identifier	Facility ID	Loc ID	Tracking Type	Inspector Name: <u>LEONARD, MIKE</u>
	<u>422196</u>	<u>422206</u>		

Operator Information:

OGCC Operator Number: <u>10276</u>	Name of Operator: <u>PINE RIDGE OIL & GAS LLC</u>
Address: <u>600 17TH ST STE 800S</u>	
City: <u>DENVER</u>	State: <u>CO</u> Zip: <u>80202</u>

Contact Information:

Contact Name	Phone	Email	Comment
Hasty, Tim	(303) 226-1300	thhasty@gmail.com	pumper
Felman, Moe	(303) 266-1300	Moe.felman@cometridgeresources.com	Sr. Operations Engineer
McCarthy, John	(303) 266-1300	John.McCarthy@cometridgeresources.com	VP Operations

Compliance Summary:

QtrQtr: <u>SENV</u>	Sec: <u>31</u>	Twp: <u>19S</u>	Range: <u>69W</u>
---------------------	----------------	-----------------	-------------------

Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Unsatisfactory	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
11/08/2011	664000137	PR	SI	S			
09/08/2011	200320502	PR	PR	S			N
04/28/2011	200308927	DG	DG	S			N
05/02/2011	200310221	PR	WO	S			N

Inspector Comment:

Related Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	
422196	WELL	PR	07/19/2011		043-06203	Triggerfish 22-31	X
422339	PIT	AC	03/25/2011		-	TRIGGERFISH 22-31	X
425073	WELL	XX	08/26/2011		043-06208	Trumpetfish 22-31	X
426625	WELL	XX	11/23/2011		043-06214	TRUMPETFISH 22-31R	X

Equipment:

Location Inventory

--

Inspector Name: LEONARD, MIKE

Special Purpose Pits: _____	Drilling Pits: <u>1</u>	Wells: <u>2</u>	Production Pits: _____
Condensate Tanks: _____	Water Tanks: _____	Separators: _____	Electric Motors: <u>2</u>
Gas or Diesel Mortors: <u>2</u>	Cavity Pumps: _____	LACT Unit: _____	Pump Jacks: <u>2</u>
Electric Generators: _____	Gas Pipeline: _____	Oil Pipeline: _____	Water Pipeline: _____
Gas Compressors: _____	VOC Combustor: _____	Oil Tanks: <u>4</u>	Dehydrator Units: _____
Multi-Well Pits: _____	Pigging Station: _____	Flare: _____	Fuel Tanks: _____

Location

Signs/Marker:				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
TANK LABELS/PLACARDS	Unsatisfactory	NO LABELING ON PRODUCTION TANKS	Install sign to comply with rule 210.b.	02/29/2012
WELLHEAD	Unsatisfactory	NO SIGNS AT WELLHEADS	Install sign to comply with rule 210.b.	02/29/2012

Emergency Contact Number: (S/U/V) Satisfactory Corrective Date: _____

Comment: _____

Corrective Action: _____

Spills:				
Type	Area	Volume	Corrective action	CA Date
<input type="checkbox"/> Multiple Spills and Releases?				

Fencing/:				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
LOCATION	Satisfactory			
PIT	Satisfactory			

Equipment:					
Type	#	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
Prime Mover	2	Satisfactory	GAS ENGINE		
Ancillary equipment	2	Satisfactory	PROPANE TANKS		
Pump Jack	2	Satisfactory	STANDARD		

Tanks/Berms:		<input type="checkbox"/> New Tank	Tank ID: _____		
Contents	#	Capacity	Type	SE GPS	
CRUDE OIL	2	500 BBLS	STEEL AST	38.353780,-105.155960	
S/U/V:	Satisfactory	Comment:	PORTABLE TANKS		
Corrective Action:				Corrective Date:	
Paint					
Condition					
Other (Content)	_____				
Other (Capacity)	_____				
Other (Type)	_____				
Berms					
Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance	
Earth	Adequate	Walls Sufficient	Base Sufficient	Adequate	
Corrective Action				Corrective Date	
Comment	IN PROCESS OF BEING BUILT				
Venting:					
Yes/No	Comment				
NO					
Flaring:					
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date	

Predrill

Location ID: 422206

Site Preparation:

Lease Road Adeq.: _____ Pads: _____ Soil Stockpile: _____
 Corrective Action: _____ Date: _____ CDP Num.: _____

Form 2A COAs:

Group	User	Comment	Date
OGLA	koepsear	Due to the likely hood of oil being received in the pit and exceeding 10,000 ppm TPH an approved Pit Permit (Form 15) will be required prior to pit construction. The form 15 shall include a pit management plan.	07/20/2011
OGLA	koepsear	Notify the COGCC Oil and Gas Location Assessment (OGLA) specialist for South Eastern Colorado (Arthur Koepsell; email arthur.koepsell@state.co.us) 48 hours prior to spudding the well.	03/22/2011
OGLA	koepsear	Due to the likely hood of oil being received in the pit and exceeding 10,000 ppm TPH an approved Pit Permit (Form 15) will be required prior to pit construction. The form 15 shall include a pit management plan.	03/18/2011

Wildlife BMPs:

Stormwater:

Comment: _____

Staking:

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:

Well

Facility ID: <u>422196</u>	API Number: <u>043-06203</u>	Status: <u>PR</u>	Insp. Status: <u>PR</u>
Facility ID: <u>425073</u>	API Number: <u>043-06208</u>	Status: <u>XX</u>	Insp. Status: <u>DA</u>
Facility ID: <u>426625</u>	API Number: <u>043-06214</u>	Status: <u>XX</u>	Insp. Status: <u>PR</u>

Environmental

Spills/Releases:

Inspector Name: LEONARD, MIKE

Type of Spill: _____ Description: _____ Estimated Spill Volume: _____
 Comment: _____
 Corrective Action: _____ Date: _____
 Reportable: _____ GPS: Lat _____ Long _____
 Proximity to Surface Water: _____ Depth to Ground Water: _____

Water Well: _____ Lat _____ Long _____
 DWR Receipt Num: _____ Owner Name: _____ GPS : _____

Field Parameters: _____

Sample Location: _____

Emission Control Burner (ECB): _____
 Comment: _____
 Pilot: _____ Wildlife Protection Devices (fired vessels): _____

Reclamation - Storm Water - Pit

Interim Reclamation:

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

Land Use: RANGELAND

Comment: _____

1003a. Debris removed? Pass CM _____

CA _____ CA Date _____

Waste Material Onsite? Pass CM _____

CA _____ CA Date _____

Unused or unneeded equipment onsite? Pass CM _____

CA _____ CA Date _____

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

CA _____ CA Date _____

Guy line anchors removed? _____ CM _____

CA _____ CA Date _____

Guy line anchors marked? Pass CM _____

CA _____ CA 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

Inspector Name: LEONARD, MIKE

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

Non-Cropland

Top soil replaced _____ Recontoured _____ 80% Revegetation _____

1003 f. Weeds Noxious weeds? _____

Comment: _____

Overall Interim Reclamation

Final Reclamation/ Abandoned Location:

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

Final Land Use: RANGELAND _____

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 _____

Comment: _____

Corrective Action: _____ Date _____

Overall Final Reclamation

Storm Water:

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

S/U/V: _____ Corrective Date: _____

Comment: _____

CA: _____

Pits:

Inspector Name: LEONARD, MIKE

Pit Type: Skimming/Settling Lined: YES Pit ID: 422339 Lat: 38.353820 Long: -105.156160

Lining:

Liner Type: HDPE Liner Condition: Adequate

Comment: _____

Fencing:

Fencing Type: Panel Fencing Condition: Adequate

Comment: _____

Netting:

Netting Type: Fence/Net Netting Condition: Good

Comment: _____

Anchor Trench Present: YES Oil Accumulation: YES 2+ feet Freeboard: _____

Pit (S/U/V): Satisfactory Comment: _____

Corrective Action: _____ Date: _____

Permit:	Facility ID	Permit Num	Expiration Date
	422339	2213140	

Monitoring:	Monitoring Type	Comment
	Other	ROPE