

**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



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Inspection Date:

01/26/2012

Document Number:

664000314

Overall Inspection:

Unsatisfactory**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Tracking Type	Inspector Name:
	<u>414750</u>	<u>414696</u>		<u>LEONARD, MIKE</u>

Operator Information:OGCC Operator Number: 10221 Name of Operator: RUNNING FOXES PETROLEUM INCAddress: 6855 S. HAVANA ST #400City: CENTENNIAL State: CO Zip: 80112**Contact Information:**

Contact Name	Phone	Email	Comment
Keppel, Kent	(720) 889-0510	kkeppel@atoka.com	COUA
Wilson, Chuck	(720) 344-5155	chuckwilson@nighthawkenenergy.com	COO

Compliance Summary:QtrQtr: SESE Sec: 32 Twp: 13S Range: 55W

Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Unsatisfactory	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
10/04/2010	200275636	PR	PR	S			N
07/07/2010	200264710	SR	PR	S			N
04/05/2010	200241260	DG	DG	S			N
02/22/2010	200232129	OI	ND	S			N

Inspector Comment:**Related Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	
414750	WELL	PR	10/13/2011	OW	073-06398	CRAIG 16-32	<input checked="" type="checkbox"/>

Equipment:Location Inventory

Special Purpose Pits: _____	Drilling Pits: <u>1</u>	Wells: <u>1</u>	Production Pits: _____
Condensate Tanks: _____	Water Tanks: _____	Separators: <u>1</u>	Electric Motors: <u>1</u>
Gas or Diesel Mortors: _____	Cavity Pumps: _____	LACT Unit: _____	Pump Jacks: <u>1</u>
Electric Generators: _____	Gas Pipeline: _____	Oil Pipeline: _____	Water Pipeline: _____
Gas Compressors: _____	VOC Combustor: _____	Oil Tanks: <u>3</u>	Dehydrator Units: _____
Multi-Well Pits: _____	Pigging Station: _____	Flare: _____	Fuel Tanks: _____

Location

Lease Road:				
Type	Satisfactory/Unsatisfactory	comment	Corrective Action	Date
Access	Unsatisfactory	NEEDS MAINTAINED TO PREVENT EROSION	MAINTAIN ROAD AND INSTALL BMP'S TO PREVENT EROSION	03/30/2012

Signs/Marker:				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
WELLHEAD	Unsatisfactory	DOES NOT REFLECT CURRENT OPERATOR	Install sign to comply with rule 210.b.	03/30/2012
BATTERY	Unsatisfactory	NO SIGN TO DESIGNATE AT BATTERY	Install sign to comply with rule 210.b.	03/30/2012
TANK LABELS/PLACARDS	Unsatisfactory	NO LABELS ON TREATER	Install sign to comply with rule 210.b.	03/30/2012

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

Comment: _____

Corrective Action: _____

Spills:				
Type	Area	Volume	Corrective action	CA Date
Crude Oil	WELLHEAD	<= 5 bbls	CLEAN UP OILY SOIL AT WELLHEAD	03/30/2012
<input type="checkbox"/> Multiple Spills and Releases?				

Fencing/:				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
WELLHEAD	Satisfactory	STEEL PANEL		
PUMP JACK	Satisfactory	STEEL PANEL		
PIT	Unsatisfactory	DOWNED PILE OF WIRE AND POSTS REMAIN	REMOVE JUNK WIRE. REPLACE FENCE OR REMOVE POSTS	03/30/2012

Equipment:					
Type	#	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
Deadman # & Marked		Satisfactory			
Ancillary equipment	1	Satisfactory	PROPANE TANK AT WELLHEAD		
Prime Mover	1	Satisfactory			
Pump Jack	1	Satisfactory			
Veritcal Heater Treater	1	Satisfactory			

Inspector Name: LEONARD, MIKE

Tanks/Berms:		<input type="checkbox"/> New Tank	Tank ID: _____	
Contents	#	Capacity	Type	SE GPS
PRODUCED WATER	2	200 BBLS	FIBERGLASS AST	,
S/U/V:			Comment:	SAME BERMS AS HEATED TANKS
Corrective Action:			Corrective Date:	

Paint

Condition	
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Other (Content) _____

Other (Capacity) _____

Other (Type) _____

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance

Corrective Action			Corrective Date	
Comment				

Tanks/Berms:		<input type="checkbox"/> New Tank	Tank ID: _____	
Contents	#	Capacity	Type	SE GPS
CRUDE OIL	2	200 BBLS	HEATED STEEL AST	38.866760,-103.577580
S/U/V:	Satisfactory	Comment: CENTRAL BATTERY FOR 15-32 AND 16-32		
Corrective Action:			Corrective Date:	

Paint

Condition	Adequate
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Other (Content) _____

Other (Capacity) _____

Other (Type) _____

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Earth	Adequate	Walls Sufficent	Base Sufficient	Adequate

Corrective Action			Corrective Date	
Comment				

Inspector Name: LEONARD, MIKE

Tanks/Berms:

☐ New Tank

Tank ID: _____

Contents	#	Capacity	Type	SE GPS
CRUDE OIL	3	200 BBLS	STEEL AST	,

S/U/V:	Satisfactory	Comment:	SAME BERMSAS HEATED TANKS	
Corrective Action:				Corrective Date:

Paint

Condition	
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Other (Content) _____

Other (Capacity) _____

Other (Type) _____

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance

Corrective Action				Corrective Date	
Comment					

Venting:

Yes/No	Comment	

Flaring:

Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date

Predrill

Location ID: 414696

Site Preparation:

Lease Road Adeq.: _____

Pads: _____

Soil Stockpile: _____

Corrective Action: _____

Date: _____ CDP Num.: _____

Form 2A COAs:**Wildlife BMPs:****Stormwater:**

Erosion BMPs	Present	Other BMPs	Present
	No		

Corrective Action: INSTALL BMP'S TO PREVENT SEDIMENT DISCHARGE FROM LOCATION Date: 03/30/2012

Comments: Erosion BMPs: NO BMP'S IN PLACE. OBVIOUS WIND EROSION ACROSS ENTIRE LOCATION AND PIT AREA. DITCH CUT ON NORTH END HAS NO BMP'S

Other BMPs: _____

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: 414750 API Number: 073-06398 Status: PR Insp. Status: PR

Environmental**Spills/Releases:**

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? Fail Production areas stabilized ? Fail

1003c. Compacted areas have been cross ripped? _____

1003d. Drilling pit closed? Pass Subsidence over on drill pit? Pass

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? Fail

Segregated soils have been replaced? _____

RESTORATION AND REVEGETATIONCropland

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

Non-CroplandTop soil replaced _____ Recontoured _____ 80% Revegetation Fail1003 f. Weeds Noxious weeds? P

Comment: SOME GRASS GROWTH ON PIT AREA

Inspector Name: LEONARD, MIKE

Overall Interim Reclamation Fail

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: _____