

**FORM
INSP**Rev
05/11**State of Colorado****Oil and Gas Conservation Commission**

1120 Lincoln Street, Suite 801, Denver, Colorado 80203 Phone: (303) 894-2100 Fax: (303) 894-2109



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| DE | ET | OE | ES |
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Inspection Date:

05/07/2012

Document Number:

663901043

Overall Inspection:

Satisfactory**FIELD INSPECTION FORM**

| | | | | |
|---------------------|---------------|---------------|---------------|---------------------|
| Location Identifier | Facility ID | Loc ID | Tracking Type | Inspector Name: |
| | <u>414280</u> | <u>414280</u> | | <u>QUINT, CRAIG</u> |

Operator Information:OGCC Operator Number: 10221 Name of Operator: RUNNING FOXES PETROLEUM INCAddress: 6855 S. HAVANA ST #400City: CENTENNIALState: COZip: 80112**Contact Information:**

| Contact Name | Phone | Email | Comment |
|-----------------|--------------|-------------------------------------|--------------------|
| Mayland, Harold | 303-550-1098 | haroldmayland@nighthawkenenergy.com | Operations Manager |
| ONYSKIW, DENISE | | denise.onyskiw@state.co.us | |
| BRACKEN, GREG | 303-638-2063 | gregbracken@nighthawkenenergy.com | Production Foreman |

Compliance Summary:QtrQtr: SENW Sec: 4 Twp: 14S Range: 55W**Inspector Comment:****Related Facilities:**

| Facility ID | Type | Status | Status Date | Well Class | API Num | Facility Name | |
|-------------|------|--------|-------------|------------|-----------|---------------|-------------------------------------|
| 414278 | WELL | IJ | 12/14/2011 | DSPW | 073-06391 | CRAIG 6-4 SWD | <input checked="" type="checkbox"/> |

Equipment:Location Inventory

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

Location**Lease Road:**

| Type | Satisfactory/Unsatisfactory | comment | Corrective Action | Date |
|------|-----------------------------|-----------------------------------|-------------------|------|
| Main | Satisfactory | LOCATION OFF OF MAIN COUNTY ROAD. | | |

Signs/Marker:

| Type | Satisfactory/Unsatisfactory | Comment | Corrective Action | CA Date |
|----------|-----------------------------|---------------------|-------------------|---------|
| WELLHEAD | Satisfactory | LEASE SIGN BY WELL. | | |

Inspector Name: QUINT, CRAIG

| | | | | |
|----------------------|--------------|---------------------------------|--|--|
| TANK LABELS/PLACARDS | Satisfactory | STICKERS AND STENCILS ON TANKS. | | |
|----------------------|--------------|---------------------------------|--|--|

Emergency Contact Number: (S/U/V) Satisfactory

Corrective Date: _____

Comment: _____

Corrective Action: _____

Spills:

| Type | Area | Volume | Corrective action | CA Date |
|------|------|--------|-------------------|---------|
|------|------|--------|-------------------|---------|

☐ Multiple Spills and Releases?

Fencing/:

| Type | Satisfactory/Unsatisfactory | Comment | Corrective Action | CA Date |
|----------|-----------------------------|------------------------------|-------------------|---------|
| WELLHEAD | Satisfactory | STEEL PANELS AROUND WELLHEAD | | |

Equipment:

| Type | # | Satisfactory/Unsatisfactory | Comment | Corrective Action | CA Date |
|--------------------|---|-----------------------------|---------|-------------------|---------|
| Deadman # & Marked | 4 | Satisfactory | | | |

Facilities:

☐ New Tank

Tank ID: _____

| Contents | # | Capacity | Type | SE GPS |
|----------------|---|----------|----------------|-----------------------|
| PRODUCED WATER | 3 | 400 BBLS | FIBERGLASS AST | 38.858630,-103.563490 |

S/U/V: Satisfactory Comment: LIGHT BROWN FGWT

Corrective Action: _____ Corrective 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 |

Corrective Action _____ Corrective Date _____

Comment IN PROCESS OF FINISHING METAL CONTAINMENT SET UP.

Venting:

| Yes/No | Comment |
|--------|---------|
| | |

Flaring:

| Type | Satisfactory/Unsatisfactory | Comment | Corrective Action | CA Date |
|------|-----------------------------|---------|-------------------|---------|
| | | | | |

Predrill

Location ID: 414280

Site Preparation:

Lease Road Adeq.: _____

Pads: _____

Soil Stockpile: _____

Corrective Action: _____

Date: _____

CDP Num.: _____

Form 2A COAs:**Comment:** _____**CA:** _____**Date:** _____**Wildlife BMPs:**

| BMP Type | Comment |
|---------------|--|
| PROPOSED BMPs | <p>STORMWATER MANAGEMENT PRACTICES</p> <p>Reference COGCC Final Rule Amendment (December 17, 2008)</p> <p>1002. SITE PREPARATION; f. Stormwater Management A. thru F.</p> <p>RUNNING FOXES PETROLEUM, INC. (RFP) will implement the following procedures and practices to remove /reduce the possibility of discharged materials that may pollute water runoff from their field facilities, operations and well site locations. These procedures and practices, will minimize the potential of any discharge or spill that could potentially pollute surface water and any stormwater runoff.</p> <p>A. Covering materials and activities:</p> <p>RFP will cover with tarps all containers /items that have the potential for material leakage. These items, whenever possible, will be kept in a central location within the operational area.</p> <p>B. Material handling and spill prevention:</p> <p>RFP will use secondary containment methods; tarps, splash pans, or appropriate prevention items when transferring, pouring, or handling items that have the potential for spills. If items are on location for a period of time they will be on pallets off the ground.</p> <p>C. Erosion controls:</p> <p>RFP maintains and constructs well pads to minimize surface grade elevations. As season and weather changes; improvements to these well pads are adjusted accordingly. Roads, culverts, stream crossings and cut /fill slopes are prepared for runoff to be controlled and directed to desired locations.</p> <p>These controls will be constructed with the cooperation of the landowner to facilitate their use of the land. Interim Reclamation on well pads is accomplished as soon as possible to minimize the effects of erosion. Topsoil will be returned and reseeding will be completed.</p> |

D. Self- inspection, maintenance, and good housekeeping:

RFP has a pumper on location almost everyday to identify these factors. Site improvement and inspection is a constant factor and monitored with the anticipation of the season and the weather. As potential contaminants are no longer needed at a set location they are removed and disposed of or stored in a more central secured monitored area. All vehicle washing is done off site.

E. Spill response procedures:

RFP has a first response the standard dirt and shovel work; if the procedures described in B above don't initially contain the spill.

This soil is removed from any surface water condition.

F. Vehicle tracking control procedures:

RFP attempts to design and maintain all roads to minimize any rutting. All operational and access roads are on non -paved roads with low potential of sediment contributing to stormwater contamination.

Comment:**CA:****Date:****Stormwater:**

| Erosion BMPs | Present | Other BMPs | Present |
|--------------|---------|------------|---------|
| | | | |

Corrective Action: _____ Date: _____

Comments: Erosion BMPs: _____

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:

Inspector Name: QUINT, CRAIG

| | | |
|--|---------------------|-------------------------|
| Name: _____ | Phone Number: _____ | Agreed to Attend: _____ |
| <u>Summary of Landowner Issues:</u> | | |
| | | |
| <u>Summary of Operator Response to Landowner Issues:</u> | | |
| | | |
| <u>Onsite Inspection Memorandum Summarizing Discussions at Inspection as Attachment:</u> | | |
| | | |

Facility

Facility ID: 414278 API Number: 073-06391 Status: IJ Insp. Status: AC

Underground Injection Control

UIC Violation: _____ Maximum Injection Pressure: _____

UIC Routine

Inj./Tube: Pressure or inches of Hg 23" HG Previous Test Pressure _____ MPP _____
(e.g. 30 psig or -30" Hg) Inj Zone: ABCK

TC: Pressure or inches of Hg 0 PSIG Previous Test Pressure _____ Last MIT: 10/04/2010

Brhd: Pressure or inches of Hg _____ Previous Test Pressure _____ AnnMTReq: NO

Comment: CASING HAD LIGHT VACUUM THAT DIED IMMEDIATELY, TBG IJ @ 23" VACUUM.

Method of Injection: GRAVITY FEED

Test Type: _____ Tbg psi: _____ Csg psi: _____ BH psi: _____

Insp. Status: _____

Comment: _____

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:

Inspector Name: QUINT, CRAIG

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? In Production areas stabilized ? Pass

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? In

Production areas have been stabilized? Pass Segregated soils have been replaced? Pass

RESTORATION AND REVEGETATION

Cropland

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

Non-Cropland

Top soil replaced Pass Recontoured Pass 80% Revegetation In

1003 f. Weeds Noxious weeds? P

Comment: UNUSED AREAS OF THE LOCATION ARE CLEAN AND CONTOURED WITH SOME GRASS GROWTH EVIDENT.

Overall Interim Reclamation In Process

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 _____

Inspector Name: QUINT, CRAIG

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 |
|------------------|-----------------|-------------------------|-----------------------|---------------|--------------------------|---------|
| Seeding | | Gravel | Pass | | | |

S/U/V: Satisfactory _____

Corrective Date: _____

Comment:

CA: