

**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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Inspection Date:

06/11/2012

Document Number:

668100098

Overall Inspection:

Satisfactory**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Tracking Type	Inspector Name:
	311643	311643		KELLERBY, SHAUN

Operator Information:OGCC Operator Number: 10079 Name of Operator: ANTERO RESOURCES PICEANCE CORPORATIONAddress: 1625 17TH ST STE 300City: DENVERState: COZip: 80202**Contact Information:**

Contact Name	Phone	Email	Comment
Black, Jon	970 625 9922/(435) 237-1169	jblack@anteroresources.com	Operations Manager: Piceance Basin

Compliance Summary:QtrQtr: SENE Sec: 16 Twp: 6S Range: 92W**Inspector Comment:****Related Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	
280074	WELL	PR	12/14/2005	GW	045-11173	VALLEY FARMS B1	<input checked="" type="checkbox"/>
280352	WELL	PR	06/01/2006	GW	045-11243	VALLEY FARMS B2	<input checked="" type="checkbox"/>
283980	WELL	PR	12/22/2006	GW	045-12055	VALLEY FARMS B6	<input checked="" type="checkbox"/>
283984	WELL	PR	03/27/2010	OW	045-12061	VALLEY FARMS B3	<input checked="" type="checkbox"/>
283985	WELL	PR	12/22/2006	GW	045-12060	VALLEY FARMS B5	<input checked="" type="checkbox"/>
283987	WELL	PR	06/30/2006	GW	045-12062	VALLEY FARMS B4	<input checked="" type="checkbox"/>
284240	WELL	PR	04/13/2006	LO	045-12118	VALLEY FARMS B7	<input checked="" type="checkbox"/>
311643	LOCATION	AC			-	VALLEY FARMS B PAD	<input checked="" type="checkbox"/>

Equipment:**Location Inventory**

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

Location**Lease Road:**

Type	Satisfactory/Unsatisfactory	comment	Corrective Action	Date
Main	Unsatisfactory	BMP not maintained	Maintain or replace BMP	07/31/2012

Inspector Name: KELLERBY, SHAUN

Signs/Marker:				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
WELLHEAD	Satisfactory			

Emergency Contact Number: (S/U/V) _____ 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
WELLHEAD	Satisfactory	Stock panel		

Equipment:					
Type	#	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
Plunger Lift	7	Satisfactory			
Emission Control Device	1	Satisfactory			
Deadman # & Marked		Unsatisfactory	Not marked	Mark or replace all deadman	07/31/2012
Gathering Line		Satisfactory			
Ancillary equipment		Satisfactory	Water pipe and manifold		
Horizontal Heated Separator	8	Satisfactory			

Facilities: <input type="checkbox"/> New Tank Tank ID: _____				
Contents	#	Capacity	Type	SE GPS
CONDENSATE	3	300 BBLS	STEEL AST	,
S/U/V:	Satisfactory	Comment:		
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
Metal	Adequate			Adequate
Corrective Action				Corrective Date
Comment				

Facilities:		<input type="checkbox"/> New Tank		Tank ID: _____	
Contents	#	Capacity	Type	SE GPS	
PRODUCED WATER	3	300 BBLS	STEEL AST	,	
S/U/V:	Satisfactory		Comment:		
Corrective Action:				Corrective Date:	
Paint					
Condition	Adequate				
Other (Content) _____					
Other (Capacity) _____					
Other (Type) _____					
Berms					
Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance	
Metal	Adequate			Adequate	
Corrective Action				Corrective Date	
Comment					
Venting:					
Yes/No		Comment			
NO					
Flaring:					
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date	

Predrill

Location ID: 311643

Site Preparation:

Lease Road Adeq.: _____

Pads: _____

Soil Stockpile: _____

Corrective Action: _____

Date: _____ CDP Num.: _____

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

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:**Facility**

Facility ID: 280074 Type: WELL API Number: 045-11173 Status: PR Insp. Status: PR

Facility ID: 280352 Type: WELL API Number: 045-11243 Status: PR Insp. Status: PR

Facility ID: 283980 Type: WELL API Number: 045-12055 Status: PR Insp. Status: PR

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Facility ID: 283984 Type: WELL API Number: 045-12061 Status: PR Insp. Status: PR

Facility ID: 283985 Type: WELL API Number: 045-12060 Status: PR Insp. Status: PR

Facility ID: 283987 Type: WELL API Number: 045-12062 Status: PR Insp. Status: PR

Facility ID: 284240 Type: WELL API Number: 045-12118 Status: PR Insp. Status: PR

Producing Well

Comment: No plunger lift

Facility ID: 311643 Type: LOCATION API Number: - Status: AC Insp. Status: AO

Complaint

Comment: Cogcc Doc # 200353142

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:

DWR Receipt Num: Owner Name: GPS : Lat Long

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:

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?	In	CM	
CA		CA Date	
Guy line anchors marked?	Fail	CM	Markers not maintained
CA	Replace all markers	CA Date	06/30/2012

1003c. Compacted areas have been cross ripped?

Cuttings management:

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

Cropland

Non-Cropland

Comment:	
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Final Reclamation/ Abandoned Location:

Final Land Use:

Reminder:

Comment:	
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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
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Compaction alleviation Dust and erosion control

Non cropland: Revegetated 80% Cropland: perennial forage

Weeds present Subsidence

Comment:

Corrective Action: _____ Date _____

Storm Water:						
Loc Erosion BMPs	BMP Maintenance	Lease Road Erosion BMPs	Lease BMP Maintenance	Chemical BMPs	Chemical BMP Maintenance	Comment

Inspector Name: KELLERBY, SHAUN

Berms	Pass	Check Dams	Pass			
Silt Fences	Pass	Gravel	Pass			
Blankets	Pass	Culverts	Fail			

S/U/V: **Unsatisfactory** Corrective Date: **07/31/2012**

Comment: Culvert on lease road is crushed on one end.

CA: Repair or replace culvert