

**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



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

09/12/2012

Document Number:

661602286

Overall Inspection:

Satisfactory**FIELD INSPECTION FORM**

| | | | | |
|---------------------|---------------|---------------|---------------|----------------------|
| Location Identifier | Facility ID | Loc ID | Tracking Type | Inspector Name: |
| | <u>295871</u> | <u>310064</u> | | <u>MONTOYA, JOHN</u> |

Operator Information:OGCC Operator Number: 8960 Name of Operator: BONANZA CREEK ENERGY OPERATING COMPANY LLCAddress: 410 17TH STREET SUITE #1400City: DENVERState: COZip: 80202**Contact Information:**

| Contact Name | Phone | Email | Comment |
|--------------|--------------|--------------------|---------|
| Jones, Alan | 661-444-0999 | jaj@bonanzacrk.com | |

Compliance Summary:

| QtrQtr: <u>NWSW</u> | Sec: <u>24</u> | Twp: <u>5N</u> | Range: <u>63W</u> | | | | |
|---------------------|----------------|----------------|-------------------|------------------------------|----------|----------------|-----------------|
| Insp. Date | Doc Num | Insp. Type | Insp Status | Satisfactory /Unsatisfactory | PA P/F/I | Pas/Fail (P/F) | Violation (Y/N) |
| 04/19/2010 | 200243579 | PR | PR | S | I | | N |

Inspector Comment:**Related Facilities:**

| Facility ID | Type | Status | Status Date | Well Class | API Num | Facility Name | |
|-------------|------|--------|-------------|------------|-----------|--------------------|-------------------------------------|
| 295871 | WELL | PR | 10/03/2008 | OW | 123-25826 | NORTH PLATTE 13-24 | <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 Mortors: _____ | 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**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 |
|------|------|--------|-------------------|---------|
|------|------|--------|-------------------|---------|

Inspector Name: MONTOYA, JOHN

☐ Multiple Spills and Releases?

Fencing:

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

Equipment:

| Type | # | Satisfactory/Unsatisfactory | Comment | Corrective Action | CA Date |
|--------------|---|-----------------------------|---------|-------------------|---------|
| Plunger Lift | 1 | Satisfactory | | | |

Venting:

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

Flaring:

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

Predrill

Location ID: 310064

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: 295871 Type: WELL API Number: 123-25826 Status: PR Insp. Status: PR

Environmental**Spills/Releases:**

Type of Spill: _____ Description: _____ Estimated Spill Volume: _____

Inspector Name: MONTOYA, JOHN

| | | | |
|---|--|------------------------------|------------|
| Comment: <input style="width:700px" type="text"/> | | | |
| 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: | | | |
| <input style="width:300px" type="text"/> | | | |
| Sample Location: <input style="width:400px" type="text"/> | | | |
| 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: <input style="width:700px" type="text"/> | | | |
| 1003a. | Debris removed? _____ CM _____ | | |
| | CA _____ | CA Date _____ | |
| | Waste Material Onsite? _____ CM _____ | | |
| | CA _____ | CA Date _____ | |
| | Unused or unneeded equipment onsite? _____ CM _____ | | |
| | CA _____ | CA Date _____ | |
| | Pit, cellars, rat holes and other bores closed? _____ CM _____ | | |
| | CA _____ | CA Date _____ | |
| | Guy line anchors removed? _____ CM _____ | | |
| | CA _____ | CA Date _____ | |
| | Guy line anchors marked? _____ 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? | | Pass _____ | |
| Production areas have been stabilized? _____ | | Segregated soils have been replaced? _____ | |
| RESTORATION AND REVEGETATION | | | |
| <u>Cropland</u> | | | |
| Top soil replaced _____ | | Recontoured _____ | Perennial forage re-established _____ |

| | | | |
|-----------------------------|----------------------|------------------|-------------|
| <u>Non-Cropland</u> | | | |
| Top soil replaced | <u>Pass</u> | Recontoured | <u>Pass</u> |
| | | 80% Revegetation | <u>In</u> |
| 1003 f. | Weeds Noxious weeds? | <u>P</u> | |
| Comment: | <div></div> | | |
| Overall Interim Reclamation | <u>Pass</u> | | |

| | |
|--|---|
| Date Final Reclamation Started: _____ | Date Final Reclamation Completed: _____ |
| Final Land Use: _____ | |
| Reminder: _____ | |
| Comment: <div style="border: 1px solid black; height: 20px; width: 100%;"></div> | |
| 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: <div style="border: 1px solid black; height: 20px; width: 100%;"></div> | |
| Corrective Action: <div style="border: 1px solid black; height: 20px; width: 100%;"></div> | Date _____ |
| Overall Final Reclamation _____ | Multi-Well Location <input type="checkbox"/> |

| 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: _____