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| 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: <p style="text-align: center;"><u>03/19/2013</u></p> Document Number: <p style="text-align: center;"><u>668600530</u></p> Overall Inspection: <p style="text-align: center;"><u>Satisfactory</u></p> |
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| | | | | | |
|---------------------|------------------------------|-------------------------|--|---|-------------------|
| Location Identifier | Facility ID <u>431625</u> | Loc ID <u>380119</u> | Inspector Name: <u>QUINT, CRAIG</u> | On-Site Inspection <input type="checkbox"/> | 2A Doc Num: _____ |
|---------------------|------------------------------|-------------------------|--|---|-------------------|

Operator Information:

OGCC Operator Number: 10422 Name of Operator: PRONGHORN OPERATING LLC

Address: 8400 E PRENTICE AVENUE #1000

City: GREENWOOD State: CO Zip: 80111

Contact Information:

| Contact Name | Phone | Email | Comment |
|----------------|--------------|--------------------------|---------|
| Kuenzler, Zane | 720-261-2019 | zanekuenzler@kfrcorp.com | |

Compliance Summary:

QtrQtr: SWSW Sec: 5 Twp: 14S Range: 44W

Inspector Comment:

Related Facilities:

| Facility ID | Type | Status | Status Date | Well Class | API Num | Facility Name | |
|-------------|------|--------|-------------|------------|-----------|---------------|-------------------------------------|
| 207083 | WELL | PA | 01/15/2013 | DA | 017-06018 | UPRR 14-5 | <input type="checkbox"/> |
| 431625 | WELL | DG | 03/13/2013 | | 017-07741 | UPRR #14-5 1X | <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: _____ |
| Gas or Diesel Mortors: _____ | Cavity Pumps: _____ | LACT Unit: _____ | Pump Jacks: _____ |
| Electric Generators: _____ | Gas Pipeline: _____ | Oil Pipeline: _____ | Water Pipeline: _____ |
| Gas Compressors: _____ | VOC Combustor: _____ | Oil Tanks: <u>1</u> | Dehydrator Units: _____ |
| Multi-Well Pits: _____ | Pigging Station: _____ | Flare: _____ | Fuel Tanks: _____ |

Location

Lease Road:

| Type | Satisfactory/Unsatisfactory | comment | Corrective Action | Date |
|--------|-----------------------------|-------------------------------|-------------------|------|
| Access | Satisfactory | DIRT ROAD THROUGH FARM GROUND | | |

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

Comment: _____

Corrective Action: _____

Spills:

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

Multiple Spills and Releases?

Venting:

Yes/No

Comment

Flaring:

Type

Satisfactory/Unsatisfactory

Comment

Corrective Action

CA Date

Predrill

Location ID: 380119

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: 431625 Type: WELL API Number: 017-07741 Status: DG Insp. Status: DG

Well Drilling

Rig: Rig Name: WILDCAT 1 Pusher/Rig Manager: JOSH KLIESEN
Permit Posted: Satisfactory Access Sign: Satisfactory

Well Control Equipment:

Pipe Ram: NO Blind Ram: NO Hydril Type: YES
Pressure Test BOP: Pass Test Pressure PSI: 600 Safety Plan: YES

Drill Fluids

Management:

Lined Pit: YES Unlined Pit: YES Closed Loop: NO Semi-Closed Loop: YES
Multi-Well: NO Disposal Location: _____

Comment:

LINED WATER PIT, METAL WORK TANKS W/UNLINED RESERVE PIT. RIG RUNNING INTERMEDIATE CASING.

Cement

Cement Contractor

Contractor Name: CONSOLIDATED Contractor Phone: 785-672-8822

Surface Casing

Cement Volume (sx): _____ Circulate to Surface: _____
Cement Fall Back: _____ Top Job, 1" Volume: _____

Intermediate Casing

Cement Volume (sxs): 150 Good Return During Job: NO

Production Casing

Cement Volume (sx): _____ Good Return During Job: _____

Plugging Operations

Depth Plugs(feet range): _____ Cement Volume (sx): _____

Good Return During Job: _____ Cement Type: CLASS A

Comment: RIG AIR DRILLED TO SET INTERMEDIATE THERE WILL BE NO RETURNS.. RIH TO 1704' W/8 5/8" CSG, RU CONSOLIDATED, DROP BALL, PUMP 125 BBL WATER TO PRESSURE AND RELEASE BALL, PUMP 150 SX CMT W/3% CAL, DISPLACE W/106BBL WATER. WOC.

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: DRY LAND

Comment: _____

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? _____

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

RESTORATION AND REVEGETATION

Cropland

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: DRY LAND

Reminder: _____

Comment: _____

Well plugged _____ Pit mouse/rat holes, cellars backfilled _____

Inspector Name: QUINT, CRAIG

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 _____ Multi-Well Location

Storm Water:

| Loc Erosion BMPs | BMP Maintenance | Lease Road Erosion BMPs | Lease BMP Maintenance | Chemical BMPs | Chemical BMP Maintenance | Comment |
|------------------|-----------------|-------------------------|-----------------------|---------------|--------------------------|---------|
| Compaction | | Compaction | | MHSP | Pass | |

S/U/V: Satisfactory Corrective Date: _____

Comment: TARPS FOR BAD WEATHER TO PROTECT MUD STORAGE.

CA: _____

Pits:

Pit Type: Water Fresh Lined: YES Pit ID: _____ Lat: 38.858430 Long: -102.366520

Lining:

Liner Type: Plastic Liner Condition: Adequate

Comment: _____

Fencing:

Fencing Type: _____ Fencing Condition: _____

Comment: _____

Netting:

Netting Type: _____ Netting Condition: _____

Comment: _____

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

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

Corrective Action: _____ Date: _____

Pits:

Pit Type: Reserve Lined: NO Pit ID: _____ Lat: 38.858000 Long: -102.366930

Lining:

Liner Type: _____ Liner Condition: _____

Comment: _____

Fencing:

Fencing Type: _____ Fencing Condition: _____

Comment: _____

Netting:

Netting Type: _____ Netting Condition: _____

Comment: _____

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

Pit (S/U/V): Satisfactory Comment: RESERVE PIT WAS USED F/UPRR 14-5 THAT WAS P&A AND IS BEING USED AGAIN F/UPRR14-5 1X.

Corrective Action: _____

Date: _____