

**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:

08/07/2013

Document Number:

670200745

Overall Inspection:

Satisfactory**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	<u>288854</u>	<u>336013</u>	<u>BURGER, CRAIG</u>	<input type="checkbox"/>	

Operator Information:

OGCC Operator Number: 10447 Name of Operator: URSA OPERATING COMPANY LLC

Address: 602 SAWYER STREET #710

City: HOUSTON State: TX Zip: 77007

Contact Information:

Contact Name	Phone	Email	Comment
Smith, Cody		csmith@ursaresources.com	
Bleil, Robert		rbleil@ursaresources.com	Regulatory & Environmental Manager
Kellerby, Shaun		Shaun.Kellerby@state.co.us	NW Field Supervisor

Compliance Summary:

QtrQtr: <u>NESW</u>		Sec: <u>12</u>		Twp: <u>6S</u>		Range: <u>93W</u>	
Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Unsatisfactory	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
04/06/2011	200309440	PR	PR	S			N
02/16/2011	200296515	PR	PR	S			N

Inspector Comment:

Conductor casing present at location of API# 045-13621.

Related Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	
278646	WELL	PR	02/01/2008	GW	045-10902	NORTH BANK C8	X
278648	WELL	PR	01/19/2009	GW	045-10904	NORTH BANK C1	X
278650	WELL	PR	10/15/2007	GW	045-10906	NORTH BANK C4	X
288847	WELL	XX	06/01/2012	LO	045-13621	North Bank C2	X
288849	WELL	XX	06/01/2012	LO	045-13613	North Bank C12	
288850	WELL	PR	12/29/2011	GW	045-13614	NORTH BANK C10	X
288851	WELL	PR	06/13/2011	GW	045-13615	NORTH BANK C11	X
288852	WELL	XX	01/26/2012	GW	045-13616	North Bank C3	
288853	WELL	XX	06/01/2012	LO	045-13617	North Bank C9	
288854	WELL	PR	01/25/2008	GW	045-13618	NORTH BANK C7	X
288855	WELL	PR	03/30/2012	GW	045-13619	NORTH BANK C6	X
288856	WELL	XX	06/01/2012	LO	045-13620	North Bank C5	

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			
BATTERY	Satisfactory			
TANK LABELS/PLACARDS	Satisfactory			

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

Corrective Date: _____

Comment: _____

Corrective Action: _____

Good Housekeeping:

Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
WEEDS	Satisfactory	Some weeds on location.		
UNUSED EQUIPMENT	Satisfactory	Metal skid on location.		

Spills:

Type	Area	Volume	Corrective action	CA Date
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☐ Multiple Spills and Releases?**Fencing/:**

Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
WELLHEAD	Satisfactory	cattle panel		
LOCATION	Satisfactory	barbed wire		

Equipment:

Type	#	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
Emission Control Device	1	Satisfactory			
Plunger Lift	7	Satisfactory			
Gathering Line	1	Satisfactory			
Deadman # & Marked	4	Satisfactory			
Ancillary equipment	1	Satisfactory	descaler unit		
Pig Station	1	Satisfactory			
Bird Protectors	4	Satisfactory			
Gas Meter Run	1	Satisfactory			
Horizontal Heated Separator	8	Satisfactory			

Inspector Name: BURGER, CRAIG

Facilities:		<input type="checkbox"/> New Tank		Tank ID: _____	
Contents	#	Capacity	Type	SE GPS	
CONDENSATE	6	300 BBLS	STEEL AST	39.539910,-107.727130	
S/U/V:	Satisfactory		Comment:	Stained gravel inside containment needs to be cleaned up.	
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					
Venting:					
Yes/No		Comment			
NO					
Flaring:					
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date	
Ignitor/Combustor	Satisfactory				

Predrill

Location ID: 336013

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: 278646 Type: WELL API Number: 045-10902 Status: PR Insp. Status: PR

Producing Well

Comment: plunger lift

Complaint

Comment: Odor complaint in area. No odors detected on location.

Inspector Name: BURGER, CRAIG

Facility ID: 278648 Type: WELL API Number: 045-10904 Status: PR Insp. Status: PR

Producing Well

Comment: plunger lift

Facility ID: 278650 Type: WELL API Number: 045-10906 Status: PR Insp. Status: PR

Producing Well

Comment: plunger lift

Facility ID: 288847 Type: WELL API Number: 045-13621 Status: XX Insp. Status: UN

Facility ID: 288850 Type: WELL API Number: 045-13614 Status: PR Insp. Status: PR

Producing Well

Comment: plunger lift

Facility ID: 288851 Type: WELL API Number: 045-13615 Status: PR Insp. Status: PR

Producing Well

Comment: plunger lift

Facility ID: 288854 Type: WELL API Number: 045-13618 Status: PR Insp. Status: PR

Producing Well

Comment: plunger lift

Facility ID: 288855 Type: WELL API Number: 045-13619 Status: PR Insp. Status: PR

Producing Well

Comment: plunger lift

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): Y _____

Comment: _____

Pilot: ON _____ Wildlife Protection Devices (fired vessels): YES _____

Reclamation - Storm Water - Pit

Interim Reclamation:

Date Interim Reclamation Started: _____ Date Interim Reclamation Completed: _____

Land Use: _____

Comment: Active permits on location.

1003a. Debris removed? Pass CM _____
 CA _____ CA Date _____
 Waste Material Onsite? Pass 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? Pass 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 REVEGETATIONCropland

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: _____

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 _____

Inspector Name: BURGER, CRAIG

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
Gravel	Pass	Ditches	Pass			
Berms	Pass	Culverts	Pass			
		Blankets	Fail			
Blankets	Pass	Waddles	Pass			

S/U/V: Satisfactory _____ Corrective Date: _____

Comment: Blankets on cut slope of access road need maintenance.

CA: