

**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:

08/07/2014

Document Number:

668701818

Overall Inspection:

Satisfactory**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	<u>438327</u>	<u>438327</u>	<u>HELGELAND, GARY</u>	<input type="checkbox"/>	

Operator Information:OGCC Operator Number: 10503 Name of Operator: RED HAWK PETROLEUM LLCAddress: 4125 BLACKHAWK PLAZA CIRCLE SUITE 201ACity: DANVILLE State: CA Zip: 94506**Contact Information:**

Contact Name	Phone	Email	Comment
INGRISELLI, FRANK		fingriselli@pedevco.com	PRESIDENT

Compliance Summary:QtrQtr: SESW Sec: 2 Twp: 7N Range: 60W**Inspector Comment:****Related Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	
438318	WELL	XX	07/30/2014		123-39923	Loomis 2-5H	<input checked="" type="checkbox"/>
438320	WELL	XX	07/30/2014		123-39925	Loomis 2-2H	<input checked="" type="checkbox"/>
438322	WELL	XX	07/30/2014		123-39927	Loomis 2-3H	<input checked="" type="checkbox"/>
438324	WELL	XX	07/30/2014		123-39929	Loomis 2-6H	<input checked="" type="checkbox"/>
438325	WELL	DG	08/14/2014		123-39930	Loomis 2-1H	<input checked="" type="checkbox"/>
438326	WELL	XX	07/30/2014		123-39931	Loomis 2-4H	<input checked="" type="checkbox"/>

Equipment:Location Inventory

Special Purpose Pits: _____	Drilling Pits: _____	Wells: <u>6</u>	Production Pits: _____
Condensate Tanks: _____	Water Tanks: _____	Separators: <u>12</u>	Electric Motors: _____
Gas or Diesel Mortors: _____	Cavity Pumps: _____	LACT Unit: _____	Pump Jacks: <u>6</u>
Electric Generators: _____	Gas Pipeline: _____	Oil Pipeline: _____	Water Pipeline: _____
Gas Compressors: <u>6</u>	VOC Combustor: _____	Oil Tanks: <u>20</u>	Dehydrator Units: _____
Multi-Well Pits: _____	Pigging Station: _____	Flare: <u>6</u>	Fuel Tanks: _____

LocationEmergency Contact Number: (S/U/V) _____

Corrective Date: _____

Comment: _____

Corrective Action: _____

Spills:

Type	Area	Volume	Corrective action	CA Date
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Inspector Name: HELGELAND, GARY

☐ Multiple Spills and Releases?

Venting:

Yes/No

Comment

Flaring:

Type

Satisfactory/Unsatisfactory

Comment

Corrective Action

CA Date

Predrill

Location ID: 438327

Site Preparation:

Lease Road Adeq.: Satisfactory

Pads: Satisfactory

Soil Stockpile: Satisfactory

Corrective Action: _____

Date: _____ CDP Num.: _____

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

BMP Type	Comment
Construction	The location will be fenced and the fenced area will include the fresh water containment. Fresh water for the fresh water storage comes from a water provider, water sources permitted for consumable industrial use.
Storm Water/Erosion Control	Material handling and spill prevention procedures and practices will be followed to help prohibit discharges to surface waters. Internal storm water inspections will be conducted per applicable stormwater regulations. Any excessive precipitation accumulation within containment should be removed as appropriate and disposed of properly. Implement appropriate erosion control devices where necessary to minimize erosion of the access road and pad.
Material Handling and Spill Prevention	Operator will ensure 110 percent secondary containment for any volume of fluids contained at the well site during drilling and completion. Operator will implement best practices to contain any unintentional release of fluids.
Drilling/Completion Operations	Drill cuttings will either be hauled to an approved spread field or waste disposal facility. Drilling fluids will be contained and hauled to an approved waste disposal facility. Flowback and stimulation fluids will be sent to tanks and/or filters to allow the sand to settle out before the fluids are hauled to a state approved disposal facility. Diking, berms, ditches and other forms of containment and diversions will be utilized around tanks, frac tanks, liquids, and/or well pad.

Comment: _____**CA:** _____**Date:** _____**Stormwater:****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: 438318	Type: WELL	API Number: 123-39923	Status: XX	Insp. Status: XX
Facility ID: 438320	Type: WELL	API Number: 123-39925	Status: XX	Insp. Status: XX
Facility ID: 438322	Type: WELL	API Number: 123-39927	Status: XX	Insp. Status: XX
Facility ID: 438324	Type: WELL	API Number: 123-39929	Status: XX	Insp. Status: XX
Facility ID: 438325	Type: WELL	API Number: 123-39930	Status: DG	Insp. Status: DG
Facility ID: 438326	Type: WELL	API Number: 123-39931	Status: XX	Insp. Status: XX

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:**

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

Land Use: CRP

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 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: CRP _____

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 _____

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

Inspector Name: HELGELAND, GARY

S/U/V:	_____	Corrective Date:	_____
Comment:	<div></div>		
CA:	<div></div>		