

Inspector Name:

**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:

12/08/2014

Document Number:

674101875

Overall Inspection:

SATISFACTORY**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection <input type="checkbox"/>
	421239	319203		2A Doc Num: _____

Operator Information:OGCC Operator Number: 10311Name of Operator: SYNERGY RESOURCES CORPORATIONAddress: 20203 HIGHWAY 60City: PLATTEVILLE State: CO Zip: 80651

- ☐ THIS IS A FOLLOW UP INSPECTION
- ☐ FOLLOW UP INSPECTION REQUIRED
- ☐ NO FOLLOW UP INSPECTION REQUIRED
- ☐ INSPECTOR REQUESTS FORM 42 WHEN CORRECTIVE ACTIONS ARE COMPLETED

Contact Information:

Contact Name	Phone	Email	Comment
Pennington, Dave		dpennington@syrinfo.com	Synergy Inspection
Rasmuson, Craig	970-737-1073	crasmuson@syrinfo.com	
Sandquist, Rhonda	970-737-1073	rsandquist@syrinfo.com	

Compliance Summary:QtrQtr: SESE Sec: 29 Twp: 1N Range: 68W

Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Action Required	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
11/29/2012	667600993	PR	PR	ACTION REQUIRED	P		No

Inspector Comment:

Related Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status	
243070	WELL	TA	03/05/2013	OW	123-10861	PRATT 29-3	TA	<input checked="" type="checkbox"/>
418031	WELL	AL	12/28/2010	LO	123-31817	SRC Pratt 44-29D	AL	<input checked="" type="checkbox"/>
418033	WELL	PR	06/05/2011	OW	123-31819	SRC Pratt 34-29D	PR	<input checked="" type="checkbox"/>
418034	WELL	PR	07/05/2011	OW	123-31820	SRC Pratt 43-29D	PR	<input checked="" type="checkbox"/>
418035	WELL	PR	12/14/2012	GW	123-31821	SRC Pratt 29TD	PR	<input checked="" type="checkbox"/>
418036	WELL	PR	12/14/2012	OW	123-31822	SRC Pratt 29XD	PR	<input checked="" type="checkbox"/>
421226	WELL	PR	07/05/2011	OW	123-32857	SRC Pratt 29PD	PR	<input checked="" type="checkbox"/>
421239	WELL	PR	10/05/2011	OW	123-32862	SRC Pratt 33-29D	PR	<input checked="" type="checkbox"/>

Equipment:Location Inventory

Inspector Name: _____

Special Purpose Pits: _____	Drilling Pits: _____	Wells: <u>7</u>	Production Pits: _____
Condensate Tanks: _____	Water Tanks: <u>3</u>	Separators: <u>6</u>	Electric Motors: _____
Gas or Diesel Mortors: _____	Cavity Pumps: _____	LACT Unit: _____	Pump Jacks: _____
Electric Generators: _____	Gas Pipeline: <u>1</u>	Oil Pipeline: _____	Water Pipeline: _____
Gas Compressors: _____	VOC Combustor: _____	Oil Tanks: <u>6</u>	Dehydrator Units: _____
Multi-Well Pits: _____	Pigging Station: _____	Flare: <u>2</u>	Fuel Tanks: _____

Location

Emergency Contact Number (S/A/V): _____

Corrective Date: _____

Comment: _____

Corrective Action: _____

Spills:

Type	Area	Volume	Corrective action	CA Date
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☐ Multiple Spills and Releases?

Venting:

Yes/No	Comment
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Flaring:

Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
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Inspector Name: _____

Predrill

Location ID: 421239

Site Preparation:

Lease Road Adeq.: _____ Pads: _____ Soil Stockpile: _____

S/A/V: _____

Corrective Action: _____ Date: _____ CDP Num.: _____

Form 2A COAs:

S/A/V: _____ **Comment:** _____

CA: _____ **Date:** _____

Wildlife BMPs:

S/A/V: _____ **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: 243070 Type: WELL API Number: 123-10861 Status: TA Insp. Status: TA

Idle Well

Purpose: ☐ Shut In ☒ Temporarily Abandoned Reminder: _____

S/A/V: SATISFACTORY CA Date: _____

CA: _____

Comment: _____

Facility ID: 418031 Type: WELL API Number: 123-31817 Status: AL Insp. Status: AL

Facility ID: 418033 Type: WELL API Number: 123-31819 Status: PR Insp. Status: PR

Inspector Name:

Producing Well

Comment: **PR**

BradenHead

Comment: **Braden head is exposed at surface.**

CA:

CA Date:

Facility ID: 418034 Type: WELL API Number: 123-31820 Status: PR Insp. Status: PR

Producing Well

Comment: **PR**

BradenHead

Comment: **Braden head is exposed at surface.**

CA:

CA Date:

Facility ID: 418035 Type: WELL API Number: 123-31821 Status: PR Insp. Status: PR

Producing Well

Comment: **PR**

BradenHead

Comment: **Braden head is exposed at surface.**

CA:

CA Date:

Facility ID: 418036 Type: WELL API Number: 123-31822 Status: PR Insp. Status: PR

Producing Well

Comment: **PR**

BradenHead

Comment: **Braden head is exposed at surface.**

CA:

CA Date:

Facility ID: 421226 Type: WELL API Number: 123-32857 Status: PR Insp. Status: PR

Producing Well

Comment: **PR**

BradenHead

Comment: **Braden head is exposed at surface.**

CA:

CA Date:

Facility ID: 421239 Type: WELL API Number: 123-32862 Status: PR Insp. Status: PR

Producing Well

Comment: **PR**

Inspector Name:

BradenHead

Comment: Braden head is exposed at surface.

CA:

CA Date:

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: DRY LAND

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? Pass CM

CA CA Date

Guy line anchors marked? CM

CA CA Date

1003b. Area no longer in use? Pass Production areas stabilized ? Pass

1003c. Compacted areas have been cross ripped? Pass

Inspector Name: _____

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, RESIDENTIAL

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 _____ Well Release on Active Location ☐ 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					

S/A/V: SATISFACTOR Corrective Date: _____

Y

Comment: _____

CA: _____

Pits: ☒ NO SURFACE INDICATION OF PIT