

**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 |
|----|----|----|----|
|----|----|----|----|

Inspection Date:
12/03/2015Document Number:
684900168Overall Inspection:
SATISFACTORY**FIELD INSPECTION FORM**

| | | | | | |
|---------------------|-------------|--------|-----------------|--------------------------|-------------|
| Location Identifier | Facility ID | Loc ID | Inspector Name: | On-Site Inspection | 2A Doc Num: |
| | 425853 | 425853 | Pesicka, Conor | <input type="checkbox"/> | |

Operator Information:

OGCC Operator Number: 10311

Name of Operator: SYNERGY RESOURCES CORPORATION

Address: 20203 HIGHWAY 60

City: 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 |
|-------------------|-------|-------------------------|-----------------|
| Gomez, Jason | | jason.gomez@state.co.us | |
| Pennington, David | | dpennington@syrinfo.com | All inspections |

Compliance Summary:

| | | | | | | | |
|---------------------|-----------|----------------|----------------|----------------------------------|-------------|-------------------|--------------------|
| QtrQtr: <u>NESE</u> | | Sec: <u>10</u> | Twp: <u>5N</u> | Range: <u>66W</u> | | | |
| Insp. Date | Doc Num | Insp. Type | Insp Status | Satisfactory /Action Required | PA P/F/I | Pas/Fail (P/F) | Violation (Y/N) |
| 12/01/2015 | 673802694 | | | SATISFACTORY | | | No |

Inspector Comment:

Facility is in the process of being transferred to Extraction. Because the facility is in the COGIS database as being operated by Synergy, inspection is being sent to Synergy.

Related Facilities:

| Facility ID | Type | Status | Status Date | Well Class | API Num | Facility Name | Insp Status | |
|-------------|------|--------|-------------|------------|-----------|-----------------|-------------|-------------------------------------|
| 425863 | WELL | PR | 09/05/2012 | OW | 123-34531 | SRC Aims 43-10D | PR | <input checked="" type="checkbox"/> |
| 425865 | WELL | PR | 07/25/2012 | OW | 123-34533 | SRC GCC 41-10D | PR | <input checked="" type="checkbox"/> |
| 425868 | WELL | AL | 10/31/2013 | LO | 123-34535 | SRC Aims 24-10D | AL | <input type="checkbox"/> |
| 425871 | WELL | PR | 06/25/2013 | OW | 123-34538 | SRC GCC 42-10D | PR | <input checked="" type="checkbox"/> |
| 425872 | WELL | PR | 07/27/2012 | OW | 123-34539 | SRC GCC 11-11D | PR | <input checked="" type="checkbox"/> |
| 425874 | WELL | PR | 07/26/2012 | GW | 123-34541 | SRC GCC 10VD | PR | <input checked="" type="checkbox"/> |
| 425880 | WELL | PR | 07/28/2012 | OW | 123-34543 | SRC GCC 12-11D | PR | <input checked="" type="checkbox"/> |
| 425901 | WELL | PR | 07/24/2012 | OW | 123-34545 | SRC Aims 34-10D | PR | <input checked="" type="checkbox"/> |
| 426355 | WELL | XX | 11/06/2011 | LO | 123-34659 | SRC Aims 23-10D | XX | <input type="checkbox"/> |

Inspector Name: Pesicka, Conor

| | | | | | | | | |
|--------|------|----|------------|----|-----------|-----------------|----|-------------------------------------|
| 426356 | WELL | PR | 07/23/2012 | GW | 123-34660 | SRC Aims 10PD | PR | <input checked="" type="checkbox"/> |
| 426359 | WELL | PR | 07/23/2012 | OW | 123-34662 | SRC Aims 33-10D | PR | <input checked="" type="checkbox"/> |

Equipment:Location Inventory

| | | | |
|-----------------------------|-------------------------|-----------------------|-------------------------|
| Special Purpose Pits: _____ | Drilling Pits: _____ | Wells: <u>15</u> | Production Pits: _____ |
| Condensate Tanks: <u>8</u> | Water Tanks: <u>5</u> | Separators: <u>15</u> | Electric Motors: _____ |
| Gas or Diesel Motors: _____ | Cavity Pumps: _____ | LACT Unit: _____ | Pump Jacks: _____ |
| Electric Generators: _____ | Gas Pipeline: <u>1</u> | Oil Pipeline: _____ | Water Pipeline: _____ |
| Gas Compressors: _____ | VOC Combustor: <u>6</u> | Oil Tanks: _____ | Dehydrator Units: _____ |
| Multi-Well Pits: _____ | Pigging Station: _____ | Flare: <u>4</u> | Fuel Tanks: _____ |

Location**Signs/Marker:**

| Type | Satisfactory/Action Required | Comment | Corrective Action | CA Date |
|----------------------|------------------------------|--------------------------------------|-------------------|---------|
| TANK LABELS/PLACARDS | SATISFACTORY | Within 2 month grace for sign change | | |
| BATTERY | SATISFACTORY | Within 2 month grace for sign change | | |
| WELLHEAD | SATISFACTORY | Within 2 month grace for sign change | | |
| CONTAINERS | SATISFACTORY | Within 2 month grace for sign change | | |

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

Corrective Date: _____

Comment: _____

Corrective Action: _____

Spills:

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

☐ Multiple Spills and Releases?**Fencing/:**

| Type | Satisfactory/Action Required | Comment | Corrective Action | CA Date |
|--------------|------------------------------|---|-------------------|---------|
| OTHER | SATISFACTORY | ECD; Chain link topped with barbed wire | | |
| SEPARATOR | SATISFACTORY | Chain link topped with barbed wire | | |
| WELLHEAD | SATISFACTORY | Chain link topped with barbed wire | | |
| TANK BATTERY | SATISFACTORY | Chain link topped with barbed wire | | |

| Equipment: | | | | | |
|-----------------------------|---|------------------------------|---------|-------------------|---------|
| Type | # | Satisfactory/Action Required | Comment | Corrective Action | CA Date |
| Horizontal Heated Separator | 5 | SATISFACTORY | | | |
| Bird Protectors | 9 | SATISFACTORY | | | |
| Plunger Lift | 9 | SATISFACTORY | | | |
| VRU | 1 | SATISFACTORY | | | |
| Pig Station | 1 | SATISFACTORY | | | |
| Emission Control Device | 4 | SATISFACTORY | | | |

Facilities: ☐ New Tank Tank ID: _____

| | | | | |
|----------|---|----------|-------|-----------------------|
| Contents | # | Capacity | Type | SE GPS |
| METHANOL | 1 | <50 BBLS | OTHER | 40.413490,-104.758930 |

S/A/V: SATISFACTORY Comment: _____

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 _____

Facilities: ☐ New Tank Tank ID: _____

| | | | | |
|----------|---|----------|-------|-----------------------|
| Contents | # | Capacity | Type | SE GPS |
| METHANOL | 2 | <50 BBLS | OTHER | 40.413700,-104.760040 |

S/A/V: SATISFACTORY Comment: _____

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 _____

Facilities: ☐ New Tank Tank ID: _____

Inspector Name: Pesicka, Conor

| | | | | |
|--------------------|--------------|----------|----------------|-----------------------|
| Contents | # | Capacity | Type | SE GPS |
| PRODUCED WATER | 2 | 200 BBLS | PBV FIBERGLASS | 40.413110,-104.759080 |
| S/A/V: | SATISFACTORY | | Comment: | |
| Corrective Action: | | | | Corrective Date: |

Paint

| | |
|-----------|----------|
| Condition | Adequate |
|-----------|----------|

Other (Content) _____

Other (Capacity) _____

Other (Type) _____

Berms

| | | | | |
|-------------------|----------|---------------------|---------------------|-----------------|
| Type | Capacity | Permeability (Wall) | Permeability (Base) | Maintenance |
| Earth | Adequate | Walls Sufficient | Base Sufficient | Adequate |
| Corrective Action | | | | Corrective Date |
| Comment | | | | |

Facilities: ☐ New Tank Tank ID: _____

| | | | | |
|--------------------|--------------|----------|-----------|-----------------------|
| Contents | # | Capacity | Type | SE GPS |
| CRUDE OIL | 9 | 300 BBLS | STEEL AST | 40.413110,-104.759080 |
| S/A/V: | SATISFACTORY | | Comment: | |
| Corrective Action: | | | | Corrective Date: |

Paint

| | |
|-----------|----------|
| Condition | Adequate |
|-----------|----------|

Other (Content) _____

Other (Capacity) _____

Other (Type) _____

Berms

| | | | | |
|-------------------|----------|---------------------|---------------------|-----------------|
| Type | Capacity | Permeability (Wall) | Permeability (Base) | Maintenance |
| Earth | Adequate | Walls Sufficient | Base Sufficient | Adequate |
| Corrective Action | | | | Corrective Date |
| Comment | | | | |

| | |
|-----------------|---------|
| Venting: | |
| Yes/No | Comment |
| NO | |

| | | | | |
|-----------------|------------------------------|---------|-------------------|---------|
| Flaring: | | | | |
| Type | Satisfactory/Action Required | Comment | Corrective Action | CA Date |
| | | | | |

Predrill

Location ID: 425853

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: 425863 Type: WELL API Number: 123-34531 Status: PR Insp. Status: PR

Producing Well

Comment: PR

BradenHead

Comment: Bradenhead plumbed to surface

CA: _____

CA Date: _____

Facility ID: 425865 Type: WELL API Number: 123-34533 Status: PR Insp. Status: PR

Producing WellComment: **PR****BradenHead**Comment: **Bradenhead plumbed to surface**

CA:

CA Date:

Facility ID: 425871 Type: WELL API Number: 123-34538 Status: PR Insp. Status: PR**Producing Well**Comment: **PR****BradenHead**Comment: **Bradenhead plumbed to surface**

CA:

CA Date:

Facility ID: 425872 Type: WELL API Number: 123-34539 Status: PR Insp. Status: PR**Producing Well**Comment: **PR****BradenHead**Comment: **Bradenhead plumbed to surface**

CA:

CA Date:

Facility ID: 425874 Type: WELL API Number: 123-34541 Status: PR Insp. Status: PR**Producing Well**Comment: **PR****BradenHead**Comment: **Bradenhead plumbed to surface**

CA:

CA Date:

Facility ID: 425880 Type: WELL API Number: 123-34543 Status: PR Insp. Status: PR**Producing Well**Comment: **PR****BradenHead**Comment: **Bradenhead plumbed to surface**

CA:

CA Date:

Facility ID: 425901 Type: WELL API Number: 123-34545 Status: PR Insp. Status: PR**Producing Well**Comment: **PR**

BradenHead

Comment: Bradenhead plumbed to surface

CA:

CA Date:

Facility ID: 426356 Type: WELL API Number: 123-34660 Status: PR Insp. Status: PR

Producing Well

Comment: PR

BradenHead

Comment: Bradenhead plumbed to surface

CA:

CA Date:

Facility ID: 426359 Type: WELL API Number: 123-34662 Status: PR Insp. Status: PR

Producing Well

Comment: PR

BradenHead

Comment: Bradenhead plumbed to 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:

Inspector Name: Pesicka, Conor

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? In _____ Production areas stabilized ? Pass _____

1003c. Compacted areas have been cross ripped? _____

1003d. Drilling pit closed? Pass _____ Subsidence over on drill pit? Pass _____

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 _____

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: _____

Inspector Name: Pesicka, Conor

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 | Gravel | Pass | | | |

S/A/V: SATISFACTOR Y Corrective Date: _____

Comment: _____

CA: _____

Pits: ☒ NO SURFACE INDICATION OF PIT

COGCC Comments

| Comment | User | Date |
|---|----------|------------|
| Location has just changed operators, so signs are for prior operator (Synergy). | pesickac | 12/03/2015 |

Attached Documents

You can go to COGCC Images (<https://cogcc.state.co.us/weblink/>) and search by document number:

| Document Num | Description | URL |
|--------------|---------------------|---|
| 684900168 | INSPECTION APPROVED | http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3732913 |