

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



Inspection Date:
02/16/2016
Document Number:
666801927
Overall Inspection:
SATISFACTORY

FIELD INSPECTION FORM

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	<u>297273</u>	<u>335526</u>	<u>Murray, Richard</u>	<input type="checkbox"/>	

Operator Information:

OGCC Operator Number:	<u>10531</u>
Name of Operator:	<u>VANGUARD OPERATING LLC</u>
Address:	<u>5847 SAN FELIPE #3000</u>
City:	<u>HOUSTON</u> State: <u>TX</u> Zip: <u>77057</u>

- 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
Axelson, Aaron	970-230-0926	aaxelson@vnrlc.com	Sr. Production Foreman
Ghan, Scott		sghan@vnrlc.com	Sr. EH&S

Compliance Summary:

QtrQtr: SWSW Sec: 21 Twp: 6S Range: 91W

Inspector Comment:

Related Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status	
297253	WELL	PR	09/18/2009	GW	045-16357	GGU JOLLEY 13D-21-691	PR	<input checked="" type="checkbox"/>
297270	WELL	PR	09/14/2009	GW	045-16370	GGU JOLLEY 13A-21-691	PR	<input checked="" type="checkbox"/>
297271	WELL	PR	09/14/2009	GW	045-16371	GGU JOLLEY 13B-21-691	PR	<input checked="" type="checkbox"/>
297272	WELL	PR	09/14/2009	GW	045-16372	GGU JOLLEY 13C-21-691	PR	<input checked="" type="checkbox"/>
297273	WELL	PR	08/31/2009	GW	045-16373	GGU JOLLEY 14A-21-691	PR	<input checked="" type="checkbox"/>
297274	WELL	PR	08/31/2009	GW	045-16374	GGU JOLLEY 14B-21-691	PR	<input checked="" type="checkbox"/>
297275	WELL	PR	08/31/2009	GW	045-16375	GGU JOLLEY 14C-21-691	PR	<input checked="" type="checkbox"/>
297276	WELL	PR	08/31/2009	GW	045-16376	GGU JOLLEY 14D-21-691	PR	<input checked="" type="checkbox"/>
299802	WELL	PR	08/05/2009	GW	045-17749	GGU JOLLEY FEDERAL 21C-28-691	PR	<input checked="" type="checkbox"/>
299803	WELL	PR	08/05/2009	GW	045-17750	GGU JOLLEY FEDERAL 21A-28-691	PR	<input checked="" type="checkbox"/>
299804	WELL	PR	10/23/2009	GW	045-17751	GGU JOLLEY FEDERAL 21B-28-691	PR	<input checked="" type="checkbox"/>

299805	WELL	PR	10/23/2009	GW	045-17752	GGU JOLLEY FEDERAL 21D-28-691	PR	<input checked="" type="checkbox"/>
299806	WELL	PR	06/26/2009	GW	045-17753	GGU JOLLEY FEDERAL 11B-28-691	PR	<input checked="" type="checkbox"/>
299807	WELL	PR	05/08/2012	GW	045-17754	GGU JOLLEY FEDERAL 11A-28-691	PR	<input checked="" type="checkbox"/>
299808	WELL	PR	06/22/2009	GW	045-17755	GGU JOLLEY FEDERAL 11C-28-691	PR	<input checked="" type="checkbox"/>
299809	WELL	PR	06/17/2009	GW	045-17756	GGU JOLLEY FEDERAL 11D-28-691	PR	<input checked="" type="checkbox"/>

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

Lease Road:

Type	Satisfactory/Action Required	comment	Corrective Action	Date

Signs/Marker:

Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
CONTAINERS	SATISFACTORY			
BATTERY	SATISFACTORY	at separators		
WELLHEAD	SATISFACTORY	Some signs are showing signs are fading		
CONTAINERS	SATISFACTORY			

Emergency Contact Number (S/AR): SATISFACTORY

Corrective Date: _____

Comment: _____

Corrective Action: _____

Good Housekeeping:

Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date

Spills:

Type	Area	Volume	Corrective action	CA Date

Multiple Spills and Releases?

Fencing/:

Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date

Equipment:			
Type: Ancillary equipment	# 7	Satisfactory/Action Required:	SATISFACTORY
Comment	Chemical units at wellhead		
Corrective Action		Date:	
Type: Horizontal Heated Separator	# 16	Satisfactory/Action Required:	SATISFACTORY
Comment			
Corrective Action		Date:	
Type: Emission Control Device	# 1	Satisfactory/Action Required:	SATISFACTORY
Comment			
Corrective Action		Date:	
Type: Plunger Lift	# 16	Satisfactory/Action Required:	SATISFACTORY
Comment			
Corrective Action		Date:	

Facilities:		<input type="checkbox"/> New Tank	Tank ID: _____	
Contents	#	Capacity	Type	SE GPS
CONDENSATE	6	500 BBLS	STEEL AST	39.506454,-107.564174
S/AR	SATISFACTORY		Comment:	3 heated 3 non-heated
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	YES
Comment	Bradenhead valves open

Flaring:			
Type		Satisfactory/Action Required	
Comment:			
Corrective Action:		Correct Action Date:	

Predrill

Location ID: 297273

Site Preparation:

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

S/AR: _____

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

Form 2A COAs:

S/AR: _____ **Comment:** _____

CA: _____ **Date:** _____

Wildlife BMPs:

S/AR: _____ **Comment:** _____

CA: _____ **Date:** _____

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: 297253 Type: WELL API Number: 045-16357 Status: PR Insp. Status: PR

Producing Well

Comment: **Plunger lift**

Facility ID: 297270 Type: WELL API Number: 045-16370 Status: PR Insp. Status: PR

Producing Well

Comment: **Plunger lift**

Facility ID: 297271 Type: WELL API Number: 045-16371 Status: PR Insp. Status: PR

Producing Well

Comment: **Plunger lift**

Facility ID: 297272	Type: WELL	API Number: 045-16372	Status: PR	Insp. Status: PR
Producing Well				
Comment: Plunger lift				
Facility ID: 297273	Type: WELL	API Number: 045-16373	Status: PR	Insp. Status: PR
Producing Well				
Comment: Plunger lift				
Facility ID: 297274	Type: WELL	API Number: 045-16374	Status: PR	Insp. Status: PR
Producing Well				
Comment: Plunger lift				
Facility ID: 297275	Type: WELL	API Number: 045-16375	Status: PR	Insp. Status: PR
Producing Well				
Comment: Plunger lift				
Facility ID: 297276	Type: WELL	API Number: 045-16376	Status: PR	Insp. Status: PR
Producing Well				
Comment: Plunger lift				
Facility ID: 299802	Type: WELL	API Number: 045-17749	Status: PR	Insp. Status: PR
Producing Well				
Comment: Plunger lift				
Facility ID: 299803	Type: WELL	API Number: 045-17750	Status: PR	Insp. Status: PR
Producing Well				
Comment: Plunger lift				
Facility ID: 299804	Type: WELL	API Number: 045-17751	Status: PR	Insp. Status: PR
Producing Well				
Comment: Plunger lift				
Facility ID: 299805	Type: WELL	API Number: 045-17752	Status: PR	Insp. Status: PR
Producing Well				
Comment: Plunger lift				
Facility ID: 299806	Type: WELL	API Number: 045-17753	Status: PR	Insp. Status: PR
Producing Well				
Comment: Plunger lift				
Facility ID: 299807	Type: WELL	API Number: 045-17754	Status: PR	Insp. Status: PR
Producing Well				
Comment: Plunger lift				
Facility ID: 299808	Type: WELL	API Number: 045-17755	Status: PR	Insp. Status: PR

Producing Well

Comment: **Plunger lift**

Facility ID: 299809 Type: WELL API Number: 045-17756 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: _____

1003a. Waste and Debris removed? 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 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: _____

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
Compaction	Pass					
Berms	Pass					
		Culverts	Pass			
		Gravel	Pass			
		Ditches	Pass			

Inspector Name: Murray, Richard

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

Comment: Snow covered location

CA: _____

Pits: NO SURFACE INDICATION OF PIT