

**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:

03/07/2016

Document Number:

673712837

Overall Inspection:

SATISFACTORY**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	300133	311229	Sherman, Susan	<input type="checkbox"/>	

Operator Information:OGCC Operator Number: 10489Name of Operator: AUGUSTUS ENERGY RESOURCES LLCAddress: 2016 GRAND AVENUE #ACity: BILLINGS State: MT Zip: 59102

- ☐ 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
DAVIS, LONI	(970) 332-3585	ldavis@augustusenergy.com	

Compliance Summary:QtrQtr: NENW Sec: 32 Twp: 1N Range: 44W

Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Action Required	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
05/26/2011	200311924	PR	PR	SATISFACTORY			No
05/26/2011	200311923	PR	PR	SATISFACTORY			No

Inspector Comment:**Related Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status	
300133	WELL	PR	05/12/2010	GW	125-11623	FRONTE 32-03	PR	<input checked="" type="checkbox"/>

Equipment:Location Inventory

Special Purpose Pits: _____	Drilling Pits: <u>1</u>	Wells: <u>1</u>	Production Pits: _____
Condensate Tanks: _____	Water Tanks: <u>1</u>	Separators: _____	Electric Motors: _____
Gas or Diesel Motors: <u>1</u>	Cavity Pumps: _____	LACT Unit: _____	Pump Jacks: <u>1</u>
Electric Generators: _____	Gas Pipeline: <u>1</u>	Oil Pipeline: _____	Water Pipeline: <u>1</u>
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

Inspector Name: Sherman, Susan

Signs/Marker:				
Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
WELLHEAD	SATISFACTORY			
OTHER	SATISFACTORY	signs on meter house @ CR 31 for Fonte 32-03, Weigel 29-11 and Weigel 29-14		

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
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☐ Multiple Spills and Releases?

Fencing/:				
Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
WELLHEAD	SATISFACTORY	steel panels		
OTHER	SATISFACTORY	steel panels around meter sheds		

Equipment:

Type: Gas Meter Run	# 3	Satisfactory/Action Required:	SATISFACTORY
Comment	2 sheds, GPS 40.01286, -102.31412		
Corrective Action			Date:
Type: Prime Mover	# 1	Satisfactory/Action Required:	SATISFACTORY
Comment	gas engine		
Corrective Action			Date:
Type: Ancillary equipment	# 3	Satisfactory/Action Required:	SATISFACTORY
Comment	gas scrubber, radio telemetry, solar panel		
Corrective Action			Date:
Type: Pump Jack	# 1	Satisfactory/Action Required:	SATISFACTORY
Comment	concrete pad		
Corrective Action			Date:
Type: Vertical Separator	# 3	Satisfactory/Action Required:	SATISFACTORY
Comment	partially buried		
Corrective Action			Date:

Venting:

Inspector Name: Sherman, Susan

Yes/No	
Comment	

Flaring:

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

Predrill

Location ID: 300133

Site Preparation:

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

S/AR: _____

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

Form 2A COAs:

S/AR: SATISFACTORY **Comment:** Cement to be from TD to 200' above Niobrara per COA. Actual cement for Niobrara was from 2564' to 1600'. Cement from 440' to surface.

CA: _____ **Date:** _____

Wildlife BMPs:

BMP Type	Comment
PROPOSED BMPs	<p data-bbox="358 132 695 163">Best Management Practices</p> <p data-bbox="358 247 1127 279">Rosetta Resources Operating LP proposes to utilize the following</p> <p data-bbox="358 310 1495 373">Best Management Practices (BMP's) where appropriate, to prevent or reduce impacts caused by our oil and gas operations:</p> <ul data-bbox="358 457 1495 1675" style="list-style-type: none"> <li data-bbox="358 457 1495 552">• When building new well sites, limit the surface area to be disturbed to just that which is needed. When a new well is drilled and put on production, reclaim the unneeded well pad to reduce the disturbed surface area and allow the landowners to use it for agriculture. <li data-bbox="358 636 1463 730">• Return the land to near pre -use condition by reforming the surface to match the surrounding area including: terracing, drainage replacement/repair, and re- seeding with native grasses as specified by the Soil Conservation Office. <li data-bbox="358 814 1052 846">• Spray to control noxious weeds on our locations annually. <li data-bbox="358 930 1451 993">• Inspect our sites for erosion and install erosion controls such as culverts or find an alternate road route that is less likely to erode. <li data-bbox="358 1077 1127 1108">• As much as possible, utilize low impact 2 tracks on lease roads. <li data-bbox="358 1192 1422 1255">• Fill drill site pits within 120 days after completion of a new well subject to pit moisture and weather. <li data-bbox="358 1339 1414 1402">• Hydrocarbon storage tanks are surrounded by impermeable berms to prevent spills from migrating off -site. <li data-bbox="358 1486 1458 1549">• Open top tanks and unattended pits that might contain hydrocarbon are fenced and covered with nets to protect migratory fowl and animals. <li data-bbox="358 1633 1195 1665">• Plans are in place to prevent, control, and cleanup hydrocarbon spills.

S/AR: _____ Comment: _____CA: _____ Date: _____Comment: _____Staking:On Site Inspection (305):

Inspector Name: Sherman, Susan

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: 300133 Type: WELL API Number: 125-11623 Status: PR Insp. Status: PR

Producing Well

Comment: PR. Dec 2015 reported to COGCC database.

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): _____

Comment: _____

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

Reclamation - Storm Water - Pit

Interim Reclamation:

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

Land Use: DRY LAND

Comment: wheat stubble

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 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: 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 _____

Inspector Name: Sherman, Susan

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					
Compaction	Pass	Compaction	Pass			

S/A/V: SATISFACTOR
Y

Corrective Date: _____

Comment:

CA:

Pits: ☐ NO SURFACE INDICATION OF PIT

Attached Documents

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

Document Num	Description	URL
673712847	Augustus Fonge 32-03	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3801668