

**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:  
05/05/2016  
Document Number:  
673403167  
Overall Inspection:  
SATISFACTORY

**FIELD INSPECTION FORM**

|                     |               |               |                       |                          |             |
|---------------------|---------------|---------------|-----------------------|--------------------------|-------------|
| Location Identifier | Facility ID   | Loc ID        | Inspector Name:       | On-Site Inspection       | 2A Doc Num: |
|                     | <u>412905</u> | <u>413908</u> | <u>Waldron, Emily</u> | <input type="checkbox"/> |             |

**Operator Information:**

OGCC Operator Number: 10598  
Name of Operator: SANDRIDGE EXPLORATION & PRODUCTION LLC  
Address: 123 ROBERT S KERR AVE  
City: OKLAHOMA CITY State: OK Zip: 73102

- 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 |
|---------------|--------------|----------------------------|---------|
| Laird, Spence |              | slaird@sandridgeenergy.com |         |
| Niven, Jason  | 405-441-0155 | jniven@sandridgeenergy.com |         |

**Compliance Summary:**

QtrQtr: NENE Sec: 12 Twp: 7N Range: 81W

| Insp. Date | Doc Num   | Insp. Type | Insp Status | Satisfactory /Action Required | PA P/F/I | Pas/Fail (P/F) | Violation (Y/N) |
|------------|-----------|------------|-------------|-------------------------------|----------|----------------|-----------------|
| 11/03/2015 | 673402616 | PR         | PR          | SATISFACTORY                  |          |                | No              |
| 02/11/2015 | 673401786 |            |             | SATISFACTORY                  |          |                | No              |
| 09/16/2014 | 673401115 | DG         | PR          | <b>ACTION REQUIRED</b>        |          |                | No              |

**Inspector Comment:**

**Related Facilities:**

| Facility ID | Type             | Status | Status Date | Well Class | API Num   | Facility Name       | Insp Status                            |
|-------------|------------------|--------|-------------|------------|-----------|---------------------|--|
| 412827      | WELL             | AL     | 03/10/2015  | LO         | 057-06494 | MARR 4-12H          | AL <input type="checkbox"/>            |
| 412905      | WELL             | PR     | 05/15/2015  | OW         | 057-06498 | Hebron 3-12H        | PR <input checked="" type="checkbox"/> |
| 444502      | SPILL OR RELEASE | CL     | 01/08/2016  |            | -         | SPILL/RELEASE POINT | CL <input type="checkbox"/>            |

**Equipment:**

Location Inventory

|                               |                         |                        |                         |
|-------------------------------|-------------------------|------------------------|-------------------------|
| Special Purpose Pits: _____   | Drilling Pits: <u>1</u> | Wells: <u>1</u>        | Production Pits: _____  |
| Condensate Tanks: _____       | Water Tanks: <u>2</u>   | Separators: <u>2</u>   | Electric Motors: _____  |
| Gas or Diesel Mortors: _____  | Cavity Pumps: <u>2</u>  | LACT Unit: <u>1</u>    | Pump Jacks: <u>1</u>    |
| Electric Generators: <u>1</u> | Gas Pipeline: <u>1</u>  | Oil Pipeline: <u>1</u> | Water Pipeline: _____   |
| Gas Compressors: _____        | VOC Combustor: <u>1</u> | Oil Tanks: <u>5</u>    | Dehydrator Units: _____ |
| Multi-Well Pits: _____        | Pigging Station: _____  | Flare: <u>1</u>        | Fuel Tanks: _____       |

**Location**

| <b>Lease Road:</b> |                              |         |                   |      |
|--------------------|------------------------------|---------|-------------------|------|
| Type               | Satisfactory/Action Required | comment | Corrective Action | Date |
|                    |                              |         |                   |      |

| <b>Signs/Marker:</b> |                              |         |                   |         |
|----------------------|------------------------------|---------|-------------------|---------|
| Type                 | Satisfactory/Action Required | Comment | Corrective Action | CA Date |
| WELLHEAD             | SATISFACTORY                 |         |                   |         |

Emergency Contact Number (S/AR): SATISFACTORY Corrective Date: \_\_\_\_\_

Comment: 405-429-5974

Corrective Action: \_\_\_\_\_

| <b>Good Housekeeping:</b> |                              |         |                   |         |
|---------------------------|------------------------------|---------|-------------------|---------|
| Type                      | Satisfactory/Action Required | Comment | Corrective Action | CA Date |
|                           |                              |         |                   |         |

| <b>Spills:</b>   |      |        |                   |         |
|--|------|--------|-------------------|---------|
| Type   | Area | Volume | Corrective action | CA Date |
| <input type="checkbox"/> Multiple Spills and Releases? |      |        |                   |         |

| <b>Fencing/:</b> |                              |         |                   |         |
|------------------|------------------------------|---------|-------------------|---------|
| Type             | Satisfactory/Action Required | Comment | Corrective Action | CA Date |
|                  |                              |         |                   |         |

| <b>Equipment:</b>        |     |                               |              |       |  |
|--------------------------|-----|-------------------------------|--------------|-------|--|
| Type: Pump Jack          | # 1 | Satisfactory/Action Required: | SATISFACTORY |       |  |
| Comment                  |     |                               |              |       |  |
| Corrective Action        |     |                               |              | Date: |  |
| Type: Deadman # & Marked | # 4 | Satisfactory/Action Required: | SATISFACTORY |       |  |
| Comment                  |     |                               |              |       |  |
| Corrective Action        |     |                               |              | Date: |  |

| <b>Venting:</b> |    |
|-----------------|----|
| Yes/No          | NO |
| Comment         |    |

| <b>Flaring:</b>    |                              |                      |  |
|--------------------|------------------------------|----------------------|--|
| Type               | Satisfactory/Action Required |                      |  |
| Comment:           |                              |                      |  |
| Corrective Action: |                              | Correct Action Date: |  |

| <b>Predrill</b>   |               |                 |  |
|-------------------|---------------|-----------------|--|
| Location ID:      | <u>412905</u> |                 |  |
| Lease Road Adeq.: | Pads:         | Soil Stockpile: |  |
| <b>S/AR:</b>      |               |                 |  |

Corrective Action: \_\_\_\_\_ Date: \_\_\_\_\_ CDP Num.: \_\_\_\_\_

**Form 2A COAs:**

| Group | User      | Comment  | Date       |
|-------|-----------|--|------------|
| OGLA  | kubeczkod | Operator must implement best management practices to contain any unintentional release of fluids, including any fluids conveyed via temporary surface pipelines.   | 01/01/2011 |
| OGLA  | kubeczkod | Reserve pit must be lined or a closed loop system (which EOG has indicated on the Form 2A) must be implemented during drilling.  | 01/01/2011 |
| OGLA  | kubeczkod | The moisture content of any drill cuttings in a cuttings pit, trench, or pile shall be as low as practicable to prevent accumulation of liquids greater than de minimis amounts. At the time of closure, the drill cuttings must also meet the applicable standards of table 910-1.  | 01/01/2011 |
| OGLA  | kubeczkod | Operator must ensure 110 percent secondary containment for any volume of fluids contained at well site during drilling and completion operations; including, but not limited to, construction of a berm or diversion dike, diversion/collection trenches within and/or outside of berms/dikes, site grading, or other comparable measures sufficiently protective of nearby surface water. | 01/01/2011 |
| OGLA  | kubeczkod | Location is in a sensitive area because shallow groundwater; therefore either a lined drilling pit or closed loop system (which EOG has indicated on the Form 2A) must be implemented.   | 01/01/2011 |

**S/AR:** SATISFACTORY **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: 412905 Type: WELL API Number: 057-06498 Status: PR Insp. Status: PR

**Producing Well**

Comment: Pumping.

**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: RANGELAND
Comment:
1003a. Waste and Debris removed?
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 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: RANGELAND

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 |
|------------------|-----------------|-------------------------|-----------------------|---------------|--------------------------|---------|
|                  |                 |                         |                       |               |                          |         |

S/A/V: SATISFACTOR Corrective Date: \_\_\_\_\_

Y

Comment:

CA:

**Pits:**  NO SURFACE INDICATION OF PIT

