

**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:

05/06/2016

Document Number:

673713152

Overall Inspection:

SATISFACTORY**FIELD INSPECTION FORM**

|                     |             |        |                 |                          |             |
|---------------------|-------------|--------|-----------------|--------------------------|-------------|
| Location Identifier | Facility ID | Loc ID | Inspector Name: | On-Site Inspection       | 2A Doc Num: |
|                     | 204706      | 320736 | Sherman, Susan  | <input type="checkbox"/> |             |

**Operator Information:**OGCC Operator Number: 10548Name of Operator: HRM RESOURCES II LLCAddress: 410 17TH STREET #1600City: DENVER State: CO Zip: 80202

- ☐ 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 |
|------------------|----------------|----------------------|---------|
| Hutson, L. Roger | (303) 893-6621 | lrhutson@hrmres.com  |         |
| Pape, Terry      | (970) 768-5700 | tpape@hrmres.com     |         |
| Prohaska, April  | (303) 996-8697 | aprohaska@hrmres.com |         |

**Compliance Summary:**QtrQtr: NWNE Sec: 31 Twp: 5S Range: 62W

| Insp. Date | Doc Num   | Insp. Type | Insp Status | Satisfactory /Action Required | PA P/F/I | Pas/Fail (P/F) | Violation (Y/N) |
|------------|-----------|------------|-------------|-------------------------------|----------|----------------|-----------------|
| 01/27/2014 | 673701014 | PR         | PR          | SATISFACTORY                  | P        |                | No              |
| 11/29/2011 | 664000181 | PR         | PR          | SATISFACTORY                  | P        |                | No              |
| 09/22/2010 | 200281706 | SR         | PR          | SATISFACTORY                  | I        |                | No              |
| 07/07/2006 | 200096194 | PR         | PR          | SATISFACTORY                  |          | Pass           | No              |
| 12/29/1993 | 500134694 |            | PR          |                               |          | Pass           | No              |

**Inspector Comment:****Related Facilities:**

| Facility ID | Type | Status | Status Date | Well Class | API Num   | Facility Name         | Insp Status |                                     |
|-------------|------|--------|-------------|------------|-----------|-----------------------|-------------|-------------------------------------|
| 204706      | WELL | PR     | 03/22/1978  | GW         | 005-06791 | MILLER 31-31 (5-62) 1 | 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 |
|----------------------|------------------------------|---|-------------------|---------|
| WELLHEAD             | SATISFACTORY                 |   |                   |         |
| BATTERY              |                              | on CR 149 (Wolf Creek Rd) wind may have blown sign away, was present on previous inspection (Noble) |                   |         |
| CONTAINERS           | SATISFACTORY                 |   |                   |         |
| TANK LABELS/PLACARDS | 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 |
|----------|------------------------------|--------------|-------------------|---------|
| WELLHEAD | SATISFACTORY                 | steel panels |                   |         |

**Equipment:**

|                                 |  |                               |              |
|---------------------------------|--|-------------------------------|--------------|
| Type: Plunger Lift              | # 1                                      | Satisfactory/Action Required: | SATISFACTORY |
| Comment                         |  |                               |              |
| Corrective Action               |  |                               | Date:        |
| Type: Deadman # & Marked        | # 4                                      | Satisfactory/Action Required: | SATISFACTORY |
| Comment                         |  |                               |              |
| Corrective Action               |  |                               | Date:        |
| Type: Horizontal Heater Treater | # 1                                      | Satisfactory/Action Required: | SATISFACTORY |
| Comment                         | bird protector, GPS 39.57816, -104.36202 |                               |              |
| Corrective Action               |  |                               | Date:        |
| Type: Bird Protectors           | # 3                                      | Satisfactory/Action Required: | SATISFACTORY |

Inspector Name: Sherman, Susan

|                               |     |   |              |
|-------------------------------|-----|---|--------------|
| Comment                       |     |   |              |
| Corrective Action             |     | Date:   |              |
| Type: Gas Meter Run           | # 1 | Satisfactory/Action Required:                                       | SATISFACTORY |
| Comment                       |     | radio telemetry and solar panel, GPS 39.57818, -104.36198           |              |
| Corrective Action             |     | Date:   |              |
| Type: Emission Control Device | # 1 | Satisfactory/Action Required:                                       | SATISFACTORY |
| Comment                       |     | solar panel, bird protector, concrete pad, GPS 39.57818, -104.36211 |              |
| Corrective Action             |     | Date:   |              |

**Facilities:** ☐ New Tank Tank ID: \_\_\_\_\_

| Contents  | # | Capacity | Type      | SE GPS                |
|-----------|---|----------|-----------|-----------------------|
| CRUDE OIL | 1 | 400 BBLS | STEEL AST | 39.578420,-104.362800 |

|                    |              |          |                  |
|--------------------|--------------|----------|------------------|
| S/AR               | 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 |
|----------------|---|-----------|---------------------|--------|
| PRODUCED WATER | 1 | <100 BBLS | CONCRETE SUMP/VAULT | ,      |

|                    |              |          |                       |
|--------------------|--------------|----------|-----------------------|
| S/AR               | SATISFACTORY | Comment: | bird protector on top |
| Corrective Action: |              |          | Corrective Date:      |

Paint

|           |  |
|-----------|--|
| Condition |  |
|-----------|--|

Other (Content) \_\_\_\_\_

Other (Capacity) 60 BBLS \_\_\_\_\_

Other (Type) \_\_\_\_\_

Berms

| Type | Capacity | Permeability (Wall) | Permeability (Base) | Maintenance |
|------|----------|---------------------|---------------------|-------------|
|      |          |                     |                     |             |

|                   |                              |                 |  |
|-------------------|------------------------------|-----------------|--|
| Corrective Action |                              | Corrective Date |  |
| Comment           | same berms as crude oil tank |                 |  |

**Venting:**

|        |    |
|--------|----|
| Yes/No | NO |
|--------|----|

Comment **ECD pilot on****Flaring:**

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

**Predrill**

Location ID: 204706

Lease Road Adeq.: \_\_\_\_\_ Pads: \_\_\_\_\_ Soil Stockpile: \_\_\_\_\_

**S/AR:** \_\_\_\_\_

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

**Form 2A COAs:**

**S/AR:** SATISFACTORY **Comment:** **No COAs.**

**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: 204706 Type: WELL API Number: 005-06791 Status: PR Insp. Status: PR

**Producing Well**

Comment: **PR. Feb 2016 reported to COGCC database.**

**Environmental****Spills/Releases:**

Inspector Name: Sherman, Susan

|  |                              |                               |
|--|------------------------------|-------------------------------|
| Type of Spill: _____   | Description: _____           | Estimated Spill Volume: _____ |
| Comment: <div style="border: 1px solid black; height: 20px; width: 100%;"></div> |                              |                               |
| Corrective Action: _____   |                              | Date: _____                   |
| Reportable: _____  | GPS: Lat _____               | Long _____                    |
| Proximity to Surface Water: _____  | Depth to Ground Water: _____ |                               |

|                        |                   |             |            |
|------------------------|-------------------|-------------|------------|
| <b>Water Well:</b>     |                   | Lat _____   | Long _____ |
| DWR Receipt Num: _____ | Owner Name: _____ | GPS : _____ | _____      |

**Field Parameters:**

Sample Location: \_\_\_\_\_

|   |
|---|
| Emission Control Burner (ECB): _____                            |
| Comment: _____  |
| Pilot: _____ Wildlife Protection Devices (fired vessels): _____ |

### Reclamation - Storm Water - Pit

|  |  |
|--|--|
| <b>Interim Reclamation:</b>  |  |
| Date Interim Reclamation Started: _____  | Date Interim Reclamation Completed: _____  |
| Land Use: _____  |  |
| Comment: <span style="color: red;">hay field</span>  |  |
| 1003a. Waste and Debris removed? <u>Pass</u>   |  |
| CM _____   | CA _____ CA Date _____                     |
| Unused or unneeded equipment onsite? <u>Pass</u>   |  |
| CM _____   | CA _____ CA Date _____                     |
| Pit, cellars, rat holes and other bores closed? <u>Pass</u>  |  |
| CM _____   | CA _____ CA Date _____                     |
| Guy line anchors marked? <u>Pass</u>   |  |
| 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   |  |
| <u>Cropland</u>  |  |

Inspector Name: Sherman, Susan

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 |
|------------------|-----------------|-------------------------|-----------------------|---------------|--------------------------|---------|
| Gravel           | Pass            |                         |                       |               |                          |         |
| Compaction       | Pass            | Compaction              | Pass                  |               |                          |         |

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

Corrective Date: \_\_\_\_\_

Y

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   |
|--------------|---------------------------|---|
| 673713184    | HRM Miller 31-31 (5-62) 1 | <a href="http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3852973">http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3852973</a> |