

**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:

05/25/2016

Document Number:

666802192

Overall Inspection:

SATISFACTORY**FIELD INSPECTION FORM**

| | | | | | |
|---------------------|-------------|--------|-----------------|--------------------------|-------------|
| Location Identifier | Facility ID | Loc ID | Inspector Name: | On-Site Inspection | 2A Doc Num: |
| | 277909 | 335438 | Murray, Richard | <input type="checkbox"/> | |

Operator Information:OGCC Operator Number: 10531Name of Operator: VANGUARD OPERATING LLCAddress: 5847 SAN FELIPE #3000City: HOUSTON State: TX Zip: 77057

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

Compliance Summary:QtrQtr: SESE Sec: 22 Twp: 6S Range: 92W

| Insp. Date | Doc Num | Insp. Type | Insp Status | Satisfactory /Action Required | PA P/F/I | Pas/Fail (P/F) | Violation (Y/N) |
|------------|-----------|------------|-------------|-------------------------------|----------|----------------|-----------------|
| 01/11/2012 | 661400042 | PR | PR | SATISFACTORY | | | No |
| 04/19/2011 | 200309076 | PR | PR | SATISFACTORY | | | Yes |
| 06/07/2010 | 200286675 | PR | PR | SATISFACTORY | | | No |
| 05/05/2009 | 200212645 | PR | PR | SATISFACTORY | | | No |
| 11/19/2007 | 200122649 | CO | PR | SATISFACTORY | I | | No |
| 08/30/2006 | 200102200 | PR | PR | SATISFACTORY | | Pass | No |

Inspector Comment:**Related Facilities:**

| Facility ID | Type | Status | Status Date | Well Class | API Num | Facility Name | Insp Status | |
|-------------|------------------|--------|-------------|------------|-----------|------------------------|-------------|-------------------------------------|
| 277907 | WELL | PR | 03/11/2006 | GW | 045-10805 | SILT VALLEY 34C-22-692 | PR | <input checked="" type="checkbox"/> |
| 277909 | WELL | PR | 03/05/2006 | GW | 045-10806 | SILT VALLEY 34A-22-692 | PR | <input checked="" type="checkbox"/> |
| 277910 | WELL | PR | 03/05/2006 | GW | 045-10807 | SILT VALLEY 44A-22-692 | PR | <input checked="" type="checkbox"/> |
| 278947 | WELL | PR | 03/13/2006 | GW | 045-10967 | SILT VALLEY 44C-22-692 | PR | <input checked="" type="checkbox"/> |
| 440309 | SPILL OR RELEASE | CL | 12/09/2014 | | - | SPILL/RELEASE POINT | CL | <input type="checkbox"/> |

Equipment:**Location Inventory**

Inspector Name: Murray, Richard

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

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: Horizontal Heated Separator | # 4 | Satisfactory/Action Required: SATISFACTORY |
| Comment | | |
| Corrective Action | Date: _____ | |
| Type: Ancillary equipment | # 1 | Satisfactory/Action Required: SATISFACTORY |
| Comment | Chemical unit at wellhead | |
| Corrective Action | Date: _____ | |
| Type: Vertical Separator | # 1 | Satisfactory/Action Required: SATISFACTORY |
| Comment | Plumbed into well at wellhead 05-045-10805 | |
| Corrective Action | Date: _____ | |
| Type: Plunger Lift | # 4 | Satisfactory/Action Required: SATISFACTORY |

Inspector Name: Murray, Richard

| | | | |
|-------------------------------|-----|-------------------------------|--------------|
| Comment | | | |
| Corrective Action | | Date: | |
| Type: Emission Control Device | # 1 | Satisfactory/Action Required: | SATISFACTORY |
| Comment | | | |
| Corrective Action | | Date: | |

| | | | |
|--------------------|--------------|--|----------------|
| Facilities: | | <input type="checkbox"/> New Tank | Tank ID: _____ |
| Contents | # | Capacity | Type |
| PRODUCED WATER | 1 | 100 BBLS | STEEL AST |
| SE GPS | | 39.507891,-107.647060 | |
| S/AR | SATISFACTORY | Comment: Plumbed into well at wellhead 05-045-10805 | |
| 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: | | <input type="checkbox"/> New Tank | Tank ID: _____ |
| Contents | # | Capacity | Type |
| CONDENSATE | 3 | 200 BBLS | STEEL AST |
| SE GPS | | 39.508577,-107.647578 | |
| 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 | | | | |

| | |
|-----------------|-------------------------------|
| Venting: | |
| Yes/No | YES |
| Comment | Bradenhead valves open |

| |
|-----------------|
| Flaring: |
|-----------------|

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

Predrill

Location ID: 277909

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: 277907 Type: WELL API Number: 045-10805 Status: PR Insp. Status: PR

Producing Well

Comment: Plunger lift

Facility ID: 277909 Type: WELL API Number: 045-10806 Status: PR Insp. Status: PR

Producing Well

Comment: Plunger lift

Facility ID: 277910 Type: WELL API Number: 045-10807 Status: PR Insp. Status: PR

Producing WellComment: **Plunger lift**Facility ID: 278947 Type: WELL API Number: 045-10967 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:

Lat _____ Long _____

DWR Receipt Num: _____ Owner Name: _____ GPS : _____

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 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: _____

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 |
|------------------|-----------------|-------------------------|-----------------------|---------------|--------------------------|---------|
| | | Waddles | Pass | | | |
| Seeding | Pass | | | | | |
| Slope Roughening | Pass | | | | | |
| Gravel | Pass | | | | | |
| | | Gravel | Pass | | | |
| Ditches | Pass | | | | | |

Inspector Name: Murray, Richard

| | | | | | | |
|--|--|----------|------|--|--|--|
| | | Ditches | Pass | | | |
| | | Culverts | Pass | | | |

S/A/V: SATISFACTOR
Y

Corrective Date: _____

Comment: _____

CA: _____

Pits: ☒ NO SURFACE INDICATION OF PIT