

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:
06/24/2016
Document Number:
666802301
Overall Inspection:
SATISFACTORY

FIELD INSPECTION FORM

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	415085	414522	Murray, Richard	<input type="checkbox"/>	

Operator Information:

OGCC Operator Number: 10531
Name of Operator: VANGUARD OPERATING LLC
Address: 5847 SAN FELIPE #3000
City: 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
Axelson, Aaron	970-230-0926	aaxelson@vnrlc.com	Sr. Production Foreman

Compliance Summary:

QtrQtr: NENW Sec: 20 Twp: 6S Range: 91W

Inspector Comment:

Related Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status	
415055	WELL	PR	12/09/2014	GW	045-18949	JOLLEY 21A-20-691	PR	<input checked="" type="checkbox"/>
415056	WELL	PR	08/26/2010	GW	045-18950	JOLLEY FED 11A-20-691	PR	<input checked="" type="checkbox"/>
415057	WELL	PR	10/05/2010	GW	045-18951	JOLLEY FED 11C-20-691	PR	<input checked="" type="checkbox"/>
415064	WELL	PR	09/02/2010	GW	045-18952	JOLLEY FED 22B-20-691	PR	<input checked="" type="checkbox"/>
415069	WELL	PR	08/14/2010	GW	045-18953	JOLLEY FED 12D-20-691	PR	<input checked="" type="checkbox"/>
415072	WELL	PR	09/02/2010	GW	045-18954	JOLLEY FED 12A-20-691	PR	<input checked="" type="checkbox"/>
415073	WELL	PR	09/02/2010	GW	045-18955	JOLLEY FED 12B-20-691	PR	<input checked="" type="checkbox"/>
415075	WELL	PR	10/05/2010	GW	045-18956	JOLLEY 21D-20-691	PR	<input checked="" type="checkbox"/>
415076	WELL	PR	10/05/2010	GW	045-18957	JOLLEY FED 11D-20-691	PR	<input checked="" type="checkbox"/>
415084	WELL	PR	08/12/2010	GW	045-18958	JOLLEY FED 12C-20-691	PR	<input checked="" type="checkbox"/>
415085	WELL	PR	08/14/2010	GW	045-18959	JOLLEY FED 11B-20-691	PR	<input checked="" type="checkbox"/>

415086	WELL	PR	07/21/2010	GW	045-18960	JOLLEY 21B-20-691	PR	<input checked="" type="checkbox"/>
415087	WELL	PR	09/02/2010	GW	045-18961	JOLLEY FED 22A-20-691	PR	<input checked="" type="checkbox"/>
415090	WELL	PR	10/05/2010	GW	045-18962	JOLLEY 21C-20-691	PR	<input checked="" type="checkbox"/>
415091	WELL	PR	07/21/2010	GW	045-18963	JOLLEY FED 22C-20-691	PR	<input checked="" type="checkbox"/>
415092	WELL	PR	08/27/2010	GW	045-18964	JOLLEY FED 22D-20-691	PR	<input checked="" type="checkbox"/>

Equipment:

Location Inventory

Special Purpose Pits: _____	Drilling Pits: <u>1</u>	Wells: <u>16</u>	Production Pits: _____
Condensate Tanks: <u>6</u>	Water Tanks: <u>4</u>	Separators: <u>16</u>	Electric Motors: _____
Gas or Diesel Mortors: _____	Cavity Pumps: _____	LACT Unit: _____	Pump Jacks: _____
Electric Generators: _____	Gas Pipeline: <u>1</u>	Oil Pipeline: <u>1</u>	Water Pipeline: <u>1</u>
Gas Compressors: _____	VOC Combustor: <u>2</u>	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
BATTERY	SATISFACTORY			

Emergency Contact Number (S/AR): SATISFACTORY

Corrective Date: _____

Comment: _____

Corrective Action: _____

Good Housekeeping:

Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
UNUSED EQUIPMENT	SATISFACTORY	Portable 500 bbls water tanks		

Spills:

Type	Area	Volume	Corrective action	CA Date

Multiple Spills and Releases?

Fencing/:

Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date

Equipment:

Type: Gas Meter Run	# 2	Satisfactory/Action Required: SATISFACTORY
Comment		

Corrective Action		Date:	
Type: Ancillary equipment	# 5	Satisfactory/Action Required:	SATISFACTORY
Comment: Chemical units at wellhead			
Corrective Action		Date:	
Type: Plunger Lift	# 16	Satisfactory/Action Required:	SATISFACTORY
Comment:			
Corrective Action		Date:	
Type: Emission Control Device	# 1	Satisfactory/Action Required:	SATISFACTORY
Comment:			
Corrective Action		Date:	
Type: Horizontal Heated Separator	# 16	Satisfactory/Action Required:	SATISFACTORY
Comment:			
Corrective Action		Date:	
Type: Compressor	# 1	Satisfactory/Action Required:	SATISFACTORY
Comment:			
Corrective Action		Date:	

Facilities: New Tank Tank ID: _____

Contents	#	Capacity	Type	SE GPS
CONDENSATE	10	500 BBLS	STEEL AST	39.518618, -107.583248
S/AR	SATISFACTORY		Comment:	
Corrective Action:			Corrective Date:	

Paint

Condition	Adequate
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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	NO
Comment	

Flaring:

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

Predrill

Location ID: 415085

Lease Road Adeq.: _____

Pads: _____

Soil Stockpile: _____

S/AR: _____

Corrective Action: _____

Date: _____

CDP Num.: _____

Form 2A COAs:

S/AR: _____ **Comment:**

CA:

Date: _____

Wildlife BMPs:

BMP Type	Comment
PROPOSED BMPs	<p>STORM WATER BEST MANAGEMENT PRACTICES</p> <p>BILL BARRETT CORPORATION</p> <p>GENERAL BMPs</p> <ul style="list-style-type: none"> • Utilize diking and other forms of containment and diversions around tanks, drums, chemicals, liquids, pits, and impoundments. • Use drip pans, sumps, or liners where appropriate. • Limit the amount of land disturbed during construction of pad, access road, and facilities. • Employ spill response plan for all facilities. • Dispose properly offsite any wastes, fluids and other materials. <p>MATEIAL HANDLING, ACTIVITIES, PRACTICES AND STORM WATER</p> <p>Secondary containment of tanks, drums, and storage areas is mandatory to prohibit discharges to surface waters. A minimum of 110% capacity required of largest storage within containment area.</p> <p>Material handling and spill prevention procedures and practices will be followed to prohibit discharges to surface waters.</p> <p>Proper loading, unloading and transportation procedures to be followed for all materials to and from location.</p> <p>EROSION CONTROL</p> <p>Pad and access road to be designed to minimize erosion.</p> <p>Pad and access road to implement appropriate erosion control devices where necessary to minimize erosion.</p> <p>Routine inspections of sites and controls to be implemented with additions, repairs, and optimization to occur as necessary to minimize erosion.</p> <p>SELF INSPECTION, MAINTANENCE, AND HOUSEKEEPING</p> <ul style="list-style-type: none"> • All employees are trained in spill response, good housekeeping, material management practices, and procedures for equipment and container washing at least once per year. • Conduct internal storm water inspections at least semi - annually and within 24 hours of a heavy rain event. • Conduct routine inspections of all tanks and storage facilities at least weekly.

- All containment areas are to be inspected weekly or following a heavy rain event.
- Any excessive precipitation accumulation within containment should be removed and disposed of properly.
- All structural berms, dikes, and containment will be inspected periodically to ensure they are operating correctly.
 - Minimum of an annual storm water BMP inspection and outcome report document status, including repairs.

SPILL RESPONSE

- Follow spill response procedures.
- If spill occurs:
 - Safely stop the source of the spill immediately.
 - Contain the spill until clean -up is complete.
 - Cover spill with appropriate absorbent material.
 - Keep the area well ventilated.
 - Dispose of clean -up materials properly.
 - Do not use emulsifier or dispersant.

VEHICLE & LOCATION PROCEDURES

- Vehicles entering location are to be free of chemical, oil, mud, weeds, trash, and debris.
- Location to be treated to kill weeds and bladed when necessary.

Bill Barrett Corp — CDPHE Stormwater Permit Number: COR- 039752

S/IAR: SATISFACTORY **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:	415055	Type:	WELL	API Number:	045-18949	Status:	PR	Insp. Status:	PR
Producing Well									
Comment:	Plunger lift								
Facility ID:	415056	Type:	WELL	API Number:	045-18950	Status:	PR	Insp. Status:	PR
Producing Well									
Comment:	Plunger lift								
Facility ID:	415057	Type:	WELL	API Number:	045-18951	Status:	PR	Insp. Status:	PR
Producing Well									
Comment:	Plunger lift								
Facility ID:	415064	Type:	WELL	API Number:	045-18952	Status:	PR	Insp. Status:	PR
Producing Well									
Comment:	Plunger lift								
Facility ID:	415069	Type:	WELL	API Number:	045-18953	Status:	PR	Insp. Status:	PR
Producing Well									
Comment:	Plunger lift								
Facility ID:	415072	Type:	WELL	API Number:	045-18954	Status:	PR	Insp. Status:	PR
Producing Well									
Comment:	Plunger lift								
Facility ID:	415073	Type:	WELL	API Number:	045-18955	Status:	PR	Insp. Status:	PR
Producing Well									
Comment:	Plunger lift								
Facility ID:	415075	Type:	WELL	API Number:	045-18956	Status:	PR	Insp. Status:	PR
Producing Well									
Comment:	Plunger lift								
Facility ID:	415076	Type:	WELL	API Number:	045-18957	Status:	PR	Insp. Status:	PR
Producing Well									
Comment:	Plunger lift								
Facility ID:	415084	Type:	WELL	API Number:	045-18958	Status:	PR	Insp. Status:	PR
Producing Well									
Comment:	Plunger lift								
Facility ID:	415085	Type:	WELL	API Number:	045-18959	Status:	PR	Insp. Status:	PR

Producing Well

Comment: **Plunger lift**

BradenHead

Comment: **Start pressure 186psi, finsh with wisper, no fluid**

CA:

CA Date:

Facility ID: 415086 Type: WELL API Number: 045-18960 Status: PR Insp. Status: PR

Producing Well

Comment: **Plunger lift**

Facility ID: 415087 Type: WELL API Number: 045-18961 Status: PR Insp. Status: PR

Producing Well

Comment: **Plunger lift**

Facility ID: 415090 Type: WELL API Number: 045-18962 Status: PR Insp. Status: PR

Producing Well

Comment: **Plunger lift**

Facility ID: 415091 Type: WELL API Number: 045-18963 Status: PR Insp. Status: PR

Producing Well

Comment: **Plunger lift**

Facility ID: 415092 Type: WELL API Number: 045-18964 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: RANGELAND

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: RANGELAND

Reminder: _____

Comment: _____

Well plugged _____ Pit mouse/rat holes, cellars backfilled _____

Debris removed _____ No disturbance /Location never built _____

Access Roads Regraded _____ Contoured _____ Culverts removed _____

Inspector Name: Murray, Richard

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			
Berms	Pass					
Gravel	Pass					
		Culverts	Pass			
		Ditches	Pass			
Waddles	Pass					

S/A/V: SATISFACTOR Corrective Date: _____

Y

Comment: _____

CA: _____

Pits: NO SURFACE INDICATION OF PIT