

**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:

07/29/2016

Document Number:

681901228

Overall Inspection:

SATISFACTORY**FIELD INSPECTION FORM**

| | | | | | |
|---------------------|-------------|--------|-----------------|--------------------------|-------------|
| Location Identifier | Facility ID | Loc ID | Inspector Name: | On-Site Inspection | 2A Doc Num: |
| | 241614 | 318564 | HELGELAND, GARY | <input type="checkbox"/> | |

Operator Information:OGCC Operator Number: 10459Name of Operator: EXTRACTION OIL & GAS LLCAddress: 370 17TH STREET SUITE 5300City: 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 |
|----------------|-------|---------------------------------------|-----------------|
| Arthur, Denise | | denise.arthur@state.co.us | |
| , | | COGCCInspections@extracti onog.com | All inspections |

Compliance Summary:QtrQtr: SESE Sec: 21 Twp: 2N Range: 67W

| Insp. Date | Doc Num | Insp. Type | Insp Status | Satisfactory /Action Required | PA P/F/I | Pas/Fail (P/F) | Violation (Y/N) |
|------------|-----------|------------|-------------|-------------------------------|----------|----------------|-----------------|
| 01/28/2016 | 681900482 | SI | PA | AR | | Fail | No |
| 08/14/2015 | 668703348 | SI | PA | ACTION REQUIRED | | Fail | No |
| 03/07/2014 | 600000892 | PR | PR | ACTION REQUIRED | P | | No |
| 02/24/2009 | 200205795 | PR | PR | SATISFACTORY | | | No |
| 08/29/2000 | 200009167 | PR | PD | SATISFACTORY | | Pass | No |
| 01/23/2000 | 200003023 | SR | WO | SATISFACTORY | | Pass | No |
| 09/23/1998 | 500164301 | PR | TA | | | Fail | Yes |

Inspector Comment:**Related Facilities:**

| Facility ID | Type | Status | Status Date | Well Class | API Num | Facility Name | Insp Status | |
|-------------|------|--------|-------------|------------|-----------|---------------|-------------|-------------------------------------|
| 241614 | WELL | SI | 05/12/2015 | OW | 123-09403 | HORST 44-21 | SI | <input checked="" type="checkbox"/> |
| 302064 | WELL | AL | 03/18/2014 | LO | 123-30216 | HORST 44-21J | AL | <input type="checkbox"/> |

Equipment:Location Inventory

Inspector Name: HELGELAND, GARY

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

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: | # | Satisfactory/Action Required: |
|-------------------|---|-------------------------------|
| Comment | | |
| Corrective Action | | Date: _____ |

Venting:

| Yes/No |
|---------|
| |
| Comment |
| |

Flaring:

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

Predrill

Location ID: 241614

Lease Road Adeq.: _____

Pads: _____

Soil Stockpile: _____

S/AR: _____

Corrective Action: _____

Date: _____

CDP Num.: _____

Form 2A COAs:

| Group | User | Comment | Date |
|--------|---------|---|------------|
| Agency | walkerv | There will be no major planned work with workover rigs, such as refracs, recompletions, or reworks, between November 1 and July 31. Minor workover or swabbing to improve production that could be completed within a 2-day time frame would be allowed. | 06/25/2010 |
| Agency | walkerv | There will be no open pits on the location after drilling and completion operations are completed. After this time, fluids will be transported by pipeline to the tank battery located north of CR 18, on the Horst location, approximately 75 feet northeast of the Horst 44-21J wellhead. If a closed loop system is not used, the reserve pit will be sucked dry of fluids immediately following drilling and completion activities, or pits with residual fluid will be netted or screened until reclamation is completed | 06/25/2010 |
| Agency | walkerv | There will be no human disturbance or construction activity within 0.5 mile of the active bald eagle nest from November 15 to July 31. The July 31 date may be advanced if monitoring shows the chicks have left the nest before this date. | 06/25/2010 |
| Agency | walkerv | Before drilling, prairie dog holes within 150 ft of the well site should be destroyed during the period August 1 through March 1 to prevent nesting by burrowing owls. | 05/19/2010 |

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:

Inspector Name: HELGELAND, GARY

Onsite Inspection Memorandum Summarizing Discussions at Inspection as Attachment:

Facility

Facility ID: 241614 Type: WELL API Number: 123-09403 Status: SI Insp. Status: SI

Producing Well

Comment: PA

BradenHead

Comment: NO BRADENHEAD

CA:

CA Date:

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: IMPROVED PASTURE

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 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: IMPROVED PASTURE

Reminder: _____

Comment: _____

Well plugged PassPit mouse/rat holes, cellars backfilled PassDebris removed Pass

No disturbance /Location never built _____

Access Roads Regraded PassContoured Pass

Culverts removed _____

Gravel removed _____

Location and associated production facilities reclaimed _____

Locations, facilities, roads, recontoured _____

Compaction alleviation _____

Dust and erosion control _____

Non cropland: Revegetated 80% In

Cropland: perennial forage _____

Weeds present _____

Subsidence Pass

Comment: _____

Corrective Action: _____

Date _____

Overall Final Reclamation In ProcessWell 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 |
|------------------|-----------------|-------------------------|-----------------------|---------------|--------------------------|---------|
| | | | | | | |

Inspector Name: HELGELAND, GARY

S/A/V: _____ Corrective Date: _____

Comment: _____

CA: _____

Pits: ☐ NO SURFACE INDICATION OF PIT