

**FORM
INSP**Rev
X/15**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:

01/09/2017

Submitted Date:

01/09/2017

Document Number:

672500296**FIELD INSPECTION FORM**
 Loc ID 430474 Inspector Name: Gomez, Jason On-Site Inspection ☐ 2A Doc Num: _____
Operator Information:OGCC Operator Number: 10459Name of Operator: EXTRACTION OIL & GAS LLCAddress: 370 17TH STREET SUITE 5300City: DENVER State: CO Zip: 80202**Status Summary:**

- ☐ THIS IS A FOLLOW UP INSPECTION
- ☐ FOLLOW UP INSPECTION REQUIRED
- ☐ NO FOLLOW UP INSPECTION REQUIRED

Findings:12 Number of Comments0 Number of Corrective Actions☐ Corrective Action Response Requested**Contact Information:**

Contact Name	Phone	Email	Comment
,		COGCCinspections@extracti onog.com	

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
435876	WELL	PR	06/01/2015	OW	123-38816	CS-Kinkade 5-1-12	PR
435881	WELL	PR	06/01/2015	OW	123-38821	CS-Scott 1-1-12	PR
435884	WELL	PR	09/08/2014	OW	123-38824	CS-Scott 2-1-12	PR

General Comment:

LocationOverall Good: ☒

Signs/Marker:			
Type	BATTERY		
Comment:			
Corrective Action:		Date:	
Type	WELLHEAD		
Comment:			
Corrective Action:		Date:	
Type	WELLHEAD		
Comment:			
Corrective Action:		Date:	
Type	WELLHEAD		
Comment:			
Corrective Action:		Date:	
Type	TANK LABELS/PLACARDS		
Comment:			
Corrective Action:		Date:	

Emergency Contact Number:

Comment:

Corrective Action:

Date: _____

Overall Good: ☒

Spills:				
Type	Area	Volume		

In Containment: No

Comment:

☐ Multiple Spills and Releases?

Fencing/:			
Type	LOCATION		
Comment:	6' CHAIN LINK		
Corrective Action:		Date:	
Type	WELLHEAD		
Comment:	AG PANEL		
Corrective Action:		Date:	
Type	WELLHEAD		
Comment:	AG PANEL		
Corrective Action:		Date:	
Type	WELLHEAD		
Comment:	AG PANEL		

Corrective Action:		Date:	
Type	OTHER		
Comment:	COMPRESSOR WALLS		
Corrective Action:		Date:	

Equipment:			corrective date
Type: Pig Station	# 1		
Comment:			
Corrective Action:		Date:	
Type: Horizontal Heated Separator	# 3		
Comment:			
Corrective Action:		Date:	
Type: Plunger Lift	# 3		
Comment:			
Corrective Action:		Date:	
Type: Compressor	# 2		
Comment:			
Corrective Action:		Date:	
Type: Bird Protectors	# 10		
Comment:			
Corrective Action:		Date:	
Type: Emission Control Device	# 7		
Comment:			
Corrective Action:		Date:	
Type: Vertical Separator	# 4		
Comment:			
Corrective Action:		Date:	
Type: Gas Meter Run	# 1		
Comment:			
Corrective Action:		Date:	

Tanks and Berms:

Contents	#	Capacity	Type	Tank ID	SE GPS	
PRODUCED WATER	2	400 BBLS	FIBERGLASS AST		,	
Comment:						
Corrective Action:						Date:

Paint

Condition	Adequate	
Other (Content)		
Other (Capacity)		
Other (Type)		

Berms

Inspector Name: Gomez, Jason

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance	
Metal	Adequate	Walls Sufficent	Base Sufficent	Adequate	
Comment:					
Corrective Action:					Date:

Contents	#	Capacity	Type	Tank ID	SE GPS	
CRUDE OIL	12	400 BBLs	STEEL AST		,	
Comment:						
Corrective Action:						Date:

Paint

Condition	Adequate	
Other (Content)		
Other (Capacity)		
Other (Type)		

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance	
Metal	Adequate	Walls Sufficent	Base Sufficent	Adequate	
Comment:					
Corrective Action:					Date:

Venting:

Yes/No	NO		
Comment:			
Corrective Action:			Date:

Flaring:

Type			
Comment:			
Corrective Action:			Date:

Inspected FacilitiesFacility ID: 435876 Type: WELL API Number: 123-38816 Status: PR Insp. Status: PR**Producing Well**Comment: PR

Corrective Action:

Date:

BradenHeadComment: PLUMBED TO SURFACE

Corrective Action:

Date: _____

Facility ID: 435881 Type: WELL API Number: 123-38821 Status: PR Insp. Status: PR**Producing Well**Comment: PR

Corrective Action:

Date:

BradenHeadComment: PLUMBED TO SURFACE

Corrective Action:

Date: _____

Facility ID: 435884 Type: WELL API Number: 123-38824 Status: PR Insp. Status: PR**Producing Well**Comment: PR

Corrective Action:

Date:

BradenHeadComment: PLUMBED TO SURFACE

Corrective Action:

Date: _____

Environmental**Spills/Releases:**

Type of Spill:	_____	Estimated Spill Volume:	_____
Comment:	_____		
Corrective Action:	_____		Date: _____
Reportable:	_____	GPS: Lat _____	Long _____
Proximity to Surface Water:	_____	Depth to Ground Water:	_____

Water Well Complaint:

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

Field Parameters:

Sample Location:	_____	Comment:	_____
------------------	-------	----------	-------

Spill/Remediation:

Comment:	_____		
Corrective Action:	_____	Date:	_____

Emission Control Burner (ECB): YES _____

Comment: _____

Pilot: ON _____ Wildlife Protection Devices (fired vessels): YES _____

Reclamation - Storm Water - Pit

Storm Water:

Loc Erosion BMPs	BMP Maintenance	Lease Road Erosion BMPs	Lease BMP Maintenance	Chemical BMPs	Chemical BMP Maintenance	Comment
Compaction	Pass					
Gravel	Pass					

Comment:

Corrective Action:

Date:

Pits: ☒ NO SURFACE INDICATION OF PIT

Optical Gas Imaging SurveySurvey Type: RoutineCurrent Operations: ☒ Production ☐ Workover ☐ Flowback ☐ Referred to APCDGPS(entrance of location): Lat: 40.438260 Long: -104.722730Wind: Light Speed: 0-2 (mph) Direction From: SW Weather: Cloudy Temperature: 54 (F)

Assisting Staff: _____ Camera #: _____

☐ Visible Smoke ☐ Referred to CDPHE

Times Surveyed

Equipment Surveyed

Time Survey Start	AM/PM	Time Survey End	AM/PM
1510	PM	1513	PM

Equipment
Oil Tank(s)
Separation Equipment
Water Tank(s)
Wellhead(s)

Comment: _____

Corrective Action: _____

Date: _____

COGCC Comments

Comment	User	Date
ROUTINE THERMAL IMAGERY INSPECTION OF LOCATION NO VIOLATIONS OBSERVED DURING INSPECTION	gomezj	01/09/2017

Attached DocumentsYou can go to COGCC Images (<https://cogcc.state.co.us/weblink/>) and search by document number:

Document Num	Description	URL
672500297	KINKADE LOCATION	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4047692