

**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:

12/23/2016

Submitted Date:

01/10/2017

Document Number:

672500298**FIELD INSPECTION FORM**
 Loc ID 439436 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:1 Number of Comments0 Number of Corrective Actions☐ Corrective Action Response Requested**Contact Information:**

Contact Name	Phone	Email	Comment
,		COGCCinspections@extracti onog.com	
Adamczyk, Megan		megan.adamczyk@state.co.u s	

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
439433	WELL	DG	05/29/2016	LO	123-40419	Breniman 7	DG
439434	WELL	DG	05/28/2016	LO	123-40420	Breniman 6	DG
439435	WELL	DG	05/29/2016	LO	123-40421	Breniman 8	DG
439437	WELL	DG	05/26/2016	LO	123-40422	Breniman 3	DG
439438	WELL	DG	05/27/2016	LO	123-40423	Breniman 4	DG
439439	WELL	DG	05/25/2016	LO	123-40424	Breniman 2	DG
439440	WELL	DG	05/31/2016	LO	123-40425	Breniman 11	DG
439441	WELL	DG	05/25/2016	LO	123-40426	Breniman 1	DG
439442	WELL	DG	05/31/2016	LO	123-40427	Breniman 10	DG

General Comment:

Inspected FacilitiesFacility ID: 439433 Type: WELL API Number: 123-40419 Status: DG Insp. Status: DG**Well Stimulation**Stimulation Company: Liberty Stimulation Type: HYDRAULIC FRAC

Other: _____

Observation:

Maximum Casing Recorded: _____ PSI

Tubing: _____

Surface: _____

Intermediate: _____

Production: _____

Instantaneous Shut-In Pressure (ISIP) 8800

Bradenhead Psi: _____

Frac Flow Back: Fluid: _____ Gas: _____

Comment: _____

Corrective Action: _____

Date: _____

Facility ID: 439434 Type: WELL API Number: 123-40420 Status: DG Insp. Status: DG**Well Stimulation**Stimulation Company: Liberty Stimulation Type: _____

Other: _____

Observation:

Maximum Casing Recorded: _____ PSI

Tubing: _____

Surface: _____

Intermediate: _____

Production: _____

Instantaneous Shut-In Pressure (ISIP) _____

Bradenhead Psi: _____

Frac Flow Back: Fluid: _____ Gas: _____

Comment: _____

Corrective Action: _____

Date: _____

Facility ID: 439435 Type: WELL API Number: 123-40421 Status: DG Insp. Status: DG**Well Stimulation**Stimulation Company: Liberty Stimulation Type: _____

Other: _____

Observation:

Maximum Casing Recorded: _____ PSI

Tubing: _____

Surface: _____

Intermediate: _____

Production: _____

Instantaneous Shut-In Pressure (ISIP) _____

Bradenhead Psi: _____

Frac Flow Back: Fluid: _____ Gas: _____

Comment: _____

Corrective Action: _____

Date: _____

Facility ID: 439437 Type: WELL API Number: 123-40422 Status: DG Insp. Status: DG

Well Stimulation

Stimulation Company: Liberty

Stimulation Type: _____

Observation:

Other: _____

Maximum Casing Recorded: _____ PSI

Tubing: _____

Surface: _____

Intermediate: _____

Production: _____

Instantaneous Shut-In Pressure (ISIP) _____

Bradenhead Psi: _____

Frac Flow Back: _____

Fluid: _____

Gas: _____

Comment: _____

Corrective Action: _____

Date: _____

Facility ID: 439438

Type: WELL

API Number: 123-40423

Status: DG

Insp. Status: DG

Well Stimulation

Stimulation Company: Liberty

Stimulation Type: _____

Observation:

Other: _____

Maximum Casing Recorded: _____ PSI

Tubing: _____

Surface: _____

Intermediate: _____

Production: _____

Instantaneous Shut-In Pressure (ISIP) _____

Bradenhead Psi: _____

Frac Flow Back: _____

Fluid: _____

Gas: _____

Comment: _____

Corrective Action: _____

Date: _____

Facility ID: 439439

Type: WELL

API Number: 123-40424

Status: DG

Insp. Status: DG

Well Stimulation

Stimulation Company: Liberty

Stimulation Type: _____

Observation:

Other: _____

Maximum Casing Recorded: _____ PSI

Tubing: _____

Surface: _____

Intermediate: _____

Production: _____

Instantaneous Shut-In Pressure (ISIP) _____

Bradenhead Psi: _____

Frac Flow Back: _____

Fluid: _____

Gas: _____

Comment: _____

Corrective Action: _____

Date: _____

Facility ID: 439440

Type: WELL

API Number: 123-40425

Status: DG

Insp. Status: DG

Well StimulationStimulation Company: Liberty

Stimulation Type: _____

Observation:

Other: _____

Maximum Casing Recorded: _____ PSI

Tubing: _____

Surface: _____

Intermediate: _____

Production: _____

Instantaneous Shut-In Pressure (ISIP) _____

Bradenhead Psi: _____

Frac Flow Back: _____

Fluid: _____ Gas: _____

Comment: _____

Corrective Action: _____

Date: _____

Facility ID: 439441Type: WELLAPI Number: 123-40426Status: DGInsp. Status: DG**Well Stimulation**Stimulation Company: Liberty

Stimulation Type: _____

Observation:

Other: _____

Maximum Casing Recorded: _____ PSI

Tubing: _____

Surface: _____

Intermediate: _____

Production: _____

Instantaneous Shut-In Pressure (ISIP) _____

Bradenhead Psi: _____

Frac Flow Back: _____

Fluid: _____ Gas: _____

Comment: _____

Corrective Action: _____

Date: _____

Facility ID: 439442Type: WELLAPI Number: 123-40427Status: DGInsp. Status: DG

Complaint

Comment: Complaint #: 200440827

Field Inspector Assigned: Jason E. Gomez

Complaint Received:

Date: 12-23-2016 Time 1140 Hrs

Contacted by Inspector:

Date: 12-23-2016 Time 1335 Hrs

Well Number#: Location #:

Inspection Document #: 672500298

Complainant: Justin Scharton Phone: 970-222-8933

Address: 661 Yukon Ct Windsor, CO 80550

Nature of complaint: Noise

Field Inspector Actions:

On 12-23-2016, I was contacted by Jim Precup supervisor for the NE Inspection unit in reference to a noise complaint at the residence of the complainant Justin Scharton 661 Yukon Ct Windsor, Colorado.

I contacted the complainant and he indicated he was not sure of the exact location of the noise source but he described a low frequency noise he was experiencing the last few days. The complainant indicated he thought the noise could be coming from a frac location toward the west of his home.

I performed a sound study at the complaints home approx. 25' from the NW corner of his home toward the frac operation, which was approx. ½ a mile or more away from the complainant's home.

I performed a completed an inspection of the Breniman in conjunction with the sound study see inspection for details of inspection and attached sound study results.

At the time of inspection, no violations of COGCC rules were observed.

Corrective Action:

Date:

Well Stimulation

Stimulation Company: Liberty

Stimulation Type: _____

Observation:

Other: _____

Maximum Casing Recorded: _____ PSI

Tubing: _____

Surface: _____

Intermediate: _____

Production: _____

Instantaneous Shut-In Pressure (ISIP) _____

Bradenhead Psi: _____

Frac Flow Back: Fluid: _____ Gas: _____

Comment: _____

Corrective Action: _____

Date: _____

Attached Documents

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

Document Num	Description	URL
401181350	INSPECTION SUBMITTED	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4047697
672500299	Sound study	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4047693