

**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:

03/30/2017

Submitted Date:

03/30/2017

Document Number:

672500479**FIELD INSPECTION FORM**

Loc ID _____ Inspector Name: _____ On-Site Inspection ☐
430411 _____ Gomez, Jason _____ 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:2 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
438461	WELL	DG	08/08/2016	LO	123-39982	Varra 2	WO
438462	WELL	DG	08/06/2016	LO	123-39983	Varra 4	WO
438464	WELL	DG	08/06/2016	LO	123-39985	Varra 5	WO
438466	WELL	DG	08/31/2016	LO	123-39987	Varra 7	WO
438467	WELL	DG	09/01/2016	LO	123-39988	Varra 8	WO
438468	WELL	DG	08/30/2016	LO	123-39989	Varra 6	WO
438469	WELL	DG	09/02/2016	LO	123-39990	Varra 10	WO
438470	WELL	DG	08/02/2016	LO	123-39991	Varra 11	WO
438471	WELL	DG	08/01/2016	LO	123-39992	Varra 12	WO

General Comment:

LocationOverall Good: ☐

Emergency Contact Number:

Comment:

Corrective Action:

Date: _____

Overall Good: ☒**Spills:**

Type	Area	Volume		
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In Containment: No

Comment:

☐ Multiple Spills and Releases?**Equipment:**

Type: Ancillary equipment	#		corrective date
Comment:	TEMPORARY SOUND WALL AROUND LOCATION FOR SOUND MITIGATION		
Corrective Action:		Date:	

Venting:

Yes/No	NO		
Comment:			
Corrective Action:		Date:	

Flaring:

Type		
Comment:		
Corrective Action:		Date:

Inspected Facilities

Facility ID: 438461 Type: WELL API Number: 123-39982 Status: DG Insp. Status: WO

Complaint

Comment: [Complaint #: 200441252](#)

[Field Inspector Assigned: Jason E. Gomez](#)

[Complaint Received:](#)

[Date: 3-28-2017 Time 1730Hrs](#)

[Contacted by Inspector:](#)

[Date: 3-29-2017 Time 1000 Hrs](#)

[Well Number#: Location #: 430411/448213](#)

[Inspection Document #: 672500480/672500479](#)

[Complainant: Clyde Hutchins Phone: 970-567-8748](#)

[Address: 3937 Valley Crest Drive Timnath, CO 80547](#)

[Nature of complaint: Noise](#)

[Field Inspector Actions:](#)

[On 3-28-2017, I was contacted by James Precup NE supervisor of the COGCC in reference to a noise complaint at the residence of the complainant Clyde Hutchins 3937 Valley Crest Drive Timnath CO 80547.](#)

[I contacted the complainant and he indicated he had been experiencing noise an annoying sound coming from the Extraction locations which were located approx. 2 miles away to the SE of his home. The complainant stated the noise occurred during the nighttime at different times.](#)

[I performed a site inspection at the locations indicated by the complainant. See inspection doc# 672500480/672500479 for results of site inspections.](#)

[I contacted Extractions Josh Carlisle to get the sound study results from the times the complaint had experienced the noise to check for any possible compliance issues. All information from the studies and the site inspection were directed to the complaint specialist for further review.](#)

[At the time of inspection, no violations of COGCC rules were observed.](#)

Corrective Action:

Date:

Well Stimulation

Stimulation Company: LIBERTY

Stimulation Type: HYDRAULIC FRAC

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: _____

Inspector Name: Gomez, Jason

Facility ID: 438462	Type: WELL	API Number: 123-39983	Status: DG	Insp. Status: WO
Facility ID: 438464	Type: WELL	API Number: 123-39985	Status: DG	Insp. Status: WO
Facility ID: 438466	Type: WELL	API Number: 123-39987	Status: DG	Insp. Status: WO
Facility ID: 438467	Type: WELL	API Number: 123-39988	Status: DG	Insp. Status: WO
Facility ID: 438468	Type: WELL	API Number: 123-39989	Status: DG	Insp. Status: WO
Facility ID: 438469	Type: WELL	API Number: 123-39990	Status: DG	Insp. Status: WO
Facility ID: 438470	Type: WELL	API Number: 123-39991	Status: DG	Insp. Status: WO
Facility ID: 438471	Type: WELL	API Number: 123-39992	Status: DG	Insp. Status: WO

Reclamation - Storm Water - Pit**Storm Water:**

Loc Erosion BMPs	BMP Maintenance	Lease Road Erosion BMPs	Lease BMP Maintenance	Chemical BMPs	Chemical BMP Maintenance	Comment
Ditches	Pass					
Gravel	Pass					
Compaction	Pass	Compaction	Pass	Material Handling And Spill Prevention	Pass	

Comment: Corrective Action: Date: **Pits:** ☒ NO SURFACE INDICATION OF PIT**Attached Documents**You can go to COGCC Images (<https://cogcc.state.co.us/weblink/>) and search by document number:

Document Num	Description	URL
401251435	INSPECTION SUBMITTED	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4116394