

**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:

08/21/2018

Submitted Date:

08/21/2018

Document Number:

689301782**FIELD INSPECTION FORM**

Loc ID 335547	Inspector Name: Holtz, Darin	On-Site Inspection <input type="checkbox"/>	2A Doc Num: _____	Status Summary: <input type="checkbox"/> THIS IS A FOLLOW UP INSPECTION <input checked="" type="checkbox"/> FOLLOW UP INSPECTION REQUIRED <input type="checkbox"/> NO FOLLOW UP INSPECTION REQUIRED Findings: 18 Number of Comments 5 Number of Corrective Actions <input checked="" type="checkbox"/> Corrective Action Response Requested
Operator Information: OGCC Operator Number: <u>10447</u> Name of Operator: <u>URSA OPERATING COMPANY LLC</u> Address: <u>1600 BROADWAY ST STE 2600</u> City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80202</u>				

Contact Information:

Contact Name	Phone	Email	Comment
Knudson, Dwayne	970-456-3335	dknudson@ursaresources.com	All Inspections

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
289971	WELL	PR	05/01/2018	GW	045-13927	GENTRY E1	PR
289972	WELL	TA	12/01/2017	GW	045-13926	GENTRY E4	PA
290735	WELL	PR	05/01/2018	GW	045-14191	GENTRY E6	PR
290736	WELL	PR	05/01/2018	GW	045-14190	GENTRY E8	PR
295316	WELL	XX	04/02/2018	LO	045-15717	Gentry E9	ND
295318	WELL	XX	04/02/2018	LO	045-15718	Gentry E11	ND
295322	WELL	XX	04/02/2018	LO	045-15719	Gentry E7	ND
295662	WELL	XX	04/02/2018	LO	045-15803	Gentry E5	ND

General Comment:[Routine Field Inspection](#)

Location

Lease Road:			
Type	Access		
comment:			
Corrective Action	L	Date:	

Overall Good: ☒

Signs/Marker:			
Type	TANK LABELS/PLACARDS		
Comment:	Missing information on tank, see photo		
Corrective Action:	Install sign to comply with Rule 210.d.	Date:	09/21/2018

Emergency Contact Number:

Comment: 1-855-625-9922

Corrective Action:

Date:

Good Housekeeping:

Type	DEBRIS		
Comment:	Oily rags in containment. see photo		
Corrective Action:	Comply with Rule 603.f .	Date:	08/31/2018

Overall Good: ☐

Spills:				
Type	Area	Volume		

In Containment: No

Comment:

☐ Multiple Spills and Releases?**Fencing/:**

Type	WELLHEAD		
Comment:	Livestock panels		
Corrective Action:		Date:	

Equipment:

Type: Bird Protectors	# 3		corrective date
Comment:			
Corrective Action:		Date:	
Type: Horizontal Heated Separator	# 4		
Comment:			
Corrective Action:		Date:	
Type: Plunger Lift	# 3		
Comment:			
Corrective Action:		Date:	
Type: Emission Control Device	# 1		

Comment:			
Corrective Action:		Date:	
Type: Deadman # & Marked	# 5		
Comment:	missing markers, see photos		
Corrective Action:	Mark as required	Date:	09/21/2018
Type: Flow Line	# 1		
Comment:	unmarked flowline		
Corrective Action:	Mark as required	Date:	09/21/2018

Tanks and Berms:

Contents	#	Capacity	Type	Tank ID	SE GPS	
CONDENSATE	4	300 BBLs	STEEL AST		,	
Comment:	2 out of service					
Corrective Action:						Date:

Paint

Condition	Adequate	
Other (Content)	Methanol tank	
Other (Capacity)	1000 gallon	
Other (Type)		

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Metal	Adequate	Walls Sufficient	Base Sufficient	Inadequate
Comment:	Containment wall maintenance			
Corrective Action:	Repair or install berms or other secondary containment devices per Rule 605.a.(4).			
		Date:	09/21/2018	

Venting:

Yes/No	NO		
Comment:			
Corrective Action:		Date:	

Flaring:

Type		
Comment:		
Corrective Action:		Date:

Inspected Facilities

Facility ID: 289971 Type: WELL API Number: 045-13927 Status: PR Insp. Status: PR

Producing Well

Comment: Well Producing on plunger lift

Corrective Action:

Date:

Facility ID: 289972 Type: WELL API Number: 045-13926 Status: TA Insp. Status: PA

Idle Well

Purpose: ☐ Shut In ☐ Temporarily Abandoned

Reminder: _____

Comment: Well has been plugged, Doc# 401320071

Corrective Action:

Date: _____

Facility ID: 290735 Type: WELL API Number: 045-14191 Status: PR Insp. Status: PR

Producing Well

Comment: Well Producing on plunger lift

Corrective Action:

Date:

Facility ID: 290736 Type: WELL API Number: 045-14190 Status: PR Insp. Status: PR

Producing Well

Comment: Well Producing on plunger lift

Corrective Action:

Date:

Facility ID: 295316 Type: WELL API Number: 045-15717 Status: XX Insp. Status: ND

Well Drilling

Rig: Rig Name: _____ Pusher/Rig Manager: _____

Permit Posted: _____ Access Sign: _____

Well Control Equipment:

Pipe Ram: _____ Blind Ram: _____ Hydril Type: _____

Pressure Test BOP: _____ Test Pressure PSI: _____ Safety Plan: _____

Drill Fluids**Management:**

Lined Pit: _____ Unlined Pit: _____ Closed Loop: _____ Semi-Closed Loop: _____

Multi-Well: _____ Disposal Location: _____

Comment: Conductor casing installed, no Rig on location

Corrective Action:

Date:

Facility ID: 295318 Type: WELL API Number: 045-15718 Status: XX Insp. Status: ND

Well Drilling

Rig: Rig Name: _____ Pusher/Rig Manager: _____

Permit Posted: _____ Access Sign: _____

Well Control Equipment:

Pipe Ram: _____ Blind Ram: _____ Hydril Type: _____
 Pressure Test BOP: _____ Test Pressure PSI: _____ Safety Plan: _____

Drill Fluids Management:

Lined Pit: _____ Unlined Pit: _____ Closed Loop: _____ Semi-Closed Loop: _____
 Multi-Well: _____ Disposal Location: _____

Comment: [Conductor casing installed, no Rig on location](#)

Corrective Action: _____ Date: _____

Facility ID: 295322 Type: WELL API Number: 045-15719 Status: XX Insp. Status: ND

Well Drilling

Rig: Rig Name: _____ Pusher/Rig Manager: _____
 Permit Posted: _____ Access Sign: _____

Well Control Equipment:

Pipe Ram: _____ Blind Ram: _____ Hydril Type: _____
 Pressure Test BOP: _____ Test Pressure PSI: _____ Safety Plan: _____

Drill Fluids Management:

Lined Pit: _____ Unlined Pit: _____ Closed Loop: _____ Semi-Closed Loop: _____
 Multi-Well: _____ Disposal Location: _____

Comment: [Conductor casing installed, no Rig on location](#)

Corrective Action: _____ Date: _____

Facility ID: 295662 Type: WELL API Number: 045-15803 Status: XX Insp. Status: ND

Well Drilling

Rig: Rig Name: _____ Pusher/Rig Manager: _____
 Permit Posted: _____ Access Sign: _____

Well Control Equipment:

Pipe Ram: _____ Blind Ram: _____ Hydril Type: _____
 Pressure Test BOP: _____ Test Pressure PSI: _____ Safety Plan: _____

Drill Fluids Management:

Lined Pit: _____ Unlined Pit: _____ Closed Loop: _____ Semi-Closed Loop: _____
 Multi-Well: _____ Disposal Location: _____

Comment: [Conductor casing installed, no Rig on location](#)

Corrective Action: _____ Date: _____

Environmental

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
		Gravel				
Compaction						
Seeding						
		Compaction				
Berms						

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
401739986	INSPECTION SUBMITTED	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4558262
689301783	Inspection photo 689301783	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4558254