

**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

DE	ET	OE	ES
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Inspection Date:
05/15/2015Document Number:
666800980Overall Inspection:
SATISFACTORY**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	284818	334673	Murray, Richard	<input type="checkbox"/>	

Operator Information:OGCC Operator Number: 10531Name of Operator: VANGUARD OPERATING LLCAddress: 5847 SAN FELIPE #3000City: HOUSTON State: TX Zip: 77057

- ☒ 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
Axelson, Aaron	970-230-0926	aaxelson@vnrlc.com	Sr. Production Foreman
Ghan, Scott		sghan@vnrlc.com	Sr. EH&S

Compliance Summary:QtrQtr: SWSE Sec: 35 Twp: 6S Range: 92W

Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Action Required	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
04/01/2009	200208087	CO	WO	SATISFACTORY			No
02/03/2009	200203237	PR	PR	ACTION REQUIRED			Yes
10/21/2008	200197122	PR	PR	ACTION REQUIRED	I		Yes
08/27/2008	200194417	CO	PR	ACTION REQUIRED			Yes
03/25/2008	200129150	PR	PR	SATISFACTORY			No
08/21/2007	200117560	CO	PR	ACTION REQUIRED			Yes
04/03/2007	200109107	PR	PR	SATISFACTORY	I	Pass	No
03/30/2007	200108440	BH	PR	SATISFACTORY	I	Pass	No
02/07/2007	200107875	CO	PR	ACTION REQUIRED	I	Fail	No
01/02/2007	200104282	PR	PR	SATISFACTORY	I	Pass	No
12/29/2006	200104260	ER	PR	SATISFACTORY	I	Pass	No
10/01/2006	200103225	CO	WO	SATISFACTORY		Pass	No
10/01/2006	200103234	CO	WO	SATISFACTORY		Pass	No
09/26/2006	200103186	PR	WO	SATISFACTORY		Pass	No
08/24/2006	200101924	PR	WO	SATISFACTORY		Pass	No

Inspector Comment:Action required items noted in previous inspection have been satisfied**Related Facilities:**

Inspector Name: Murray, Richard

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status	
284818	WELL	PR	10/01/2014	GW	045-12284	CIRCLE B LAND 34D-35-692	PR	<input checked="" type="checkbox"/>
285094	WELL	PR	10/29/2006	GW	045-12380	CIRCLE B LAND 44C-35-692	PR	<input checked="" type="checkbox"/>
285095	WELL	PR	11/02/2006	GW	045-12379	CIRCLE B LAND 44A-35-692	PR	<input checked="" type="checkbox"/>
285096	WELL	PR	10/30/2006	GW	045-12378	CIRCLE B LAND 34B-35-692	PR	<input checked="" type="checkbox"/>
298326	PIT	AC	09/15/2008		-	CIRCLE B PAD # 6	AC	<input type="checkbox"/>

Equipment:Location Inventory

Special Purpose Pits: _____	Drilling Pits: _____	Wells: _____	Production Pits: _____
Condensate Tanks: _____	Water Tanks: _____	Separators: _____	Electric Motors: _____
Gas or Diesel Motors: _____	Cavity Pumps: _____	LACT Unit: _____	Pump Jacks: _____
Electric Generators: _____	Gas Pipeline: _____	Oil Pipeline: _____	Water Pipeline: _____
Gas Compressors: _____	VOC Combustor: _____	Oil Tanks: _____	Dehydrator Units: _____
Multi-Well Pits: _____	Pigging Station: _____	Flare: _____	Fuel Tanks: _____

Location**Signs/Marker:**

Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
BATTERY	SATISFACTORY			

Emergency Contact Number (S/A/V): SATISFACTORY

Corrective Date: _____

Comment: _____

Corrective Action: _____

Spills:

Type	Area	Volume	Corrective action	CA Date
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☐ Multiple Spills and Releases?**Equipment:**

Type	#	Satisfactory/Action Required	Comment	Corrective Action	CA Date
Plunger Lift	4	SATISFACTORY			
Horizontal Separator	4	SATISFACTORY			
Emission Control Device	1	SATISFACTORY			
Pig Station	1	SATISFACTORY			
Compressor	1	SATISFACTORY			
Gas Meter Run	4	SATISFACTORY			
Horizontal Heated Separator	5	SATISFACTORY			

Venting:

Yes/No	Comment
YES	Bradenhead valves open

Flaring:				
Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date

Predrill

Location ID: 284818

Site Preparation:

Lease Road Adeq.: _____ Pads: _____ Soil Stockpile: _____

S/A/V: _____

Corrective Action: _____ Date: _____ CDP Num.: _____

Form 2A COAs:**S/A/V:** _____ **Comment:** _____**CA:** _____ **Date:** _____**Wildlife BMPs:****S/A/V:** _____ **Comment:** _____**CA:** _____ **Date:** _____**Stormwater:****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:Onsite Inspection Memorandum Summarizing Discussions at Inspection as Attachment:**Facility**

Facility ID: 284818 Type: WELL API Number: 045-12284 Status: PR Insp. Status: PR

Producing Well

Comment: Plunger lift

Facility ID: 285094 Type: WELL API Number: 045-12380 Status: PR Insp. Status: PR

Producing Well

Comment: Plunger lift

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Facility ID: 285095 Type: WELL API Number: 045-12379 Status: PR Insp. Status: PR

Producing Well

Comment: Plunger lift

Facility ID: 285096 Type: WELL API Number: 045-12378 Status: PR Insp. Status: PR

Producing Well

Comment: Plunger lift

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:

Waste Management:

Type	Management	Condition	Comment	GPS (Lat) (Long)
Frac Sand				

Emission Control Burner (ECB): Y

Comment:

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

Reclamation - Storm Water - Pit

Interim Reclamation:

Date Interim Reclamation Started: Date Interim Reclamation Completed:

Land Use:

Comment:

1003a. Debris removed? Pass CM CA Date
Waste Material Onsite? Pass CM CA Date
Unused or unneeded equipment onsite? Pass CM CA Date
Pit, cellars, rat holes and other bores closed? Pass CM CA Date

Inspector Name: Murray, Richard

Guy line anchors removed? _____ CM _____

CA _____ CA Date _____

Guy line anchors marked? Pass CM _____

CA _____ CA Date _____

1003b. Area no longer in use? Pass Production areas stabilized ? Pass

1003c. Compacted areas have been cross ripped? Pass

1003d. Drilling pit closed? Pass 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 REVEGETATION

Cropland

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: _____

Reminder: _____

Comment: _____

Well plugged _____ Pit mouse/rat holes, cellars backfilled _____

Debris removed _____ No disturbance /Location never built _____

Access Roads Regraded _____ Contoured _____ Culverts removed _____

Gravel removed _____

Location and associated production facilities reclaimed _____ Locations, facilities, roads, recontoured _____

Compaction alleviation _____ Dust and erosion control _____

Non cropland: Revegetated 80% _____ Cropland: perennial forage _____

Weeds present _____ Subsidence _____

Comment: _____

Corrective Action: _____ Date _____

Overall Final Reclamation _____ Well 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
Seeding	Pass					
Sediment Traps	Pass					
		Culverts	Pass			

Inspector Name: Murray, Richard

		Check Dams	Pass			
		Ditches	Pass			
Rip Rap	Pass					
Berms	Pass					

S/A/V: SATISFACTOR
Y

Corrective Date: _____

Comment:

CA:

Pits: ☒ NO SURFACE INDICATION OF PIT

Permit:	Facility ID	Permit Num	Expiration Date
	298326	1433926	
	298326	1433926	