

**FORM  
INSP**Rev  
05/11**State of Colorado****Oil and Gas Conservation Commission**

1120 Lincoln Street, Suite 801, Denver, Colorado 80205 Phone: (303) 894-2100 Fax: (303) 894-2109



|    |    |    |    |
|----|----|----|----|
| DE | ET | OE | ES |
|----|----|----|----|

Inspection Date:

03/01/2012

Document Number:

661600756

Overall Inspection:

Satisfactory**FIELD INSPECTION FORM**

|                     |               |               |               |                      |
|---------------------|---------------|---------------|---------------|----------------------|
| Location Identifier | Facility ID   | Loc ID        | Tracking Type | Inspector Name:      |
|                     | <u>248762</u> | <u>328883</u> |               | <u>MONTOYA, JOHN</u> |

**Operator Information:**

OGCC Operator Number: 47120 Name of Operator: KERR-MCGEE OIL & GAS ONSHORE LP

Address: P O BOX 173779

City: DENVER State: CO Zip: 80217-

**Contact Information:**

|              |        |                        |                                    |
|--------------|--------|------------------------|------------------------------------|
| Contact Name | Phone  | Email                  | Comment                            |
| Price, Tom   | /10318 | tom.price@anadarko.com | Wattenberg South Prod'n Supervisor |

**Compliance Summary:**

| QtrQtr: <u>SENW</u> | Sec: <u>18</u> | Twp: <u>4N</u> | Range: <u>65W</u> |                              |          |                |                 |
|---------------------|----------------|----------------|-------------------|------------------------------|----------|----------------|-----------------|
| Insp. Date          | Doc Num        | Insp. Type     | Insp Status       | Satisfactory /Unsatisfactory | PA P/F/I | Pas/Fail (P/F) | Violation (Y/N) |
| 09/22/2010          | 200272370      | PR             | PR                | S                            |          |                | N               |
| 02/02/2005          | 200065935      | PR             | PR                | S                            |          | P              | N               |

**Inspector Comment:****Related Facilities:**

| Facility ID | Type     | Status | Status Date | Well Class | API Num   | Facility Name         |  |
|-------------|----------|--------|-------------|------------|-----------|-----------------------|--|
| 248762      | WELL     | PR     | 12/22/2008  | GW         | 123-16564 | KINSMAN 22-18         |  |
| 328883      | LOCATION | AC     | 04/14/2009  |            | -         | KINSMAN-64N65W 18SENW |  |

**Equipment:**Location Inventory

|                              |                        |                     |                         |
|------------------------------|------------------------|---------------------|-------------------------|
| Special Purpose Pits: _____  | Drilling Pits: _____   | Wells: _____        | Production Pits: _____  |
| Condensate Tanks: _____      | Water Tanks: _____     | Separators: _____   | Electric Motors: _____  |
| Gas or Diesel Mortors: _____ | 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/Unsatisfactory | Comment | Corrective Action | CA Date |
|----------------------|-----------------------------|---------|-------------------|---------|
| CONTAINERS           | Satisfactory                |         |                   |         |
| TANK LABELS/PLACARDS | Satisfactory                |         |                   |         |
| WELLHEAD             | Satisfactory                |         |                   |         |
| BATTERY              | Satisfactory                |         |                   |         |

Inspector Name: MONTOYA, JOHN

|   |                        |
|---|------------------------|
| Emergency Contact Number: (S/U/V) _____ | Corrective Date: _____ |
| Comment: _____                          |                        |
| Corrective Action: _____                |                        |

|  |      |        |                   |         |
|--|------|--------|-------------------|---------|
| <b>Spills:</b>   |      |        |                   |         |
| Type   | Area | Volume | Corrective action | CA Date |
| <input type="checkbox"/> Multiple Spills and Releases? |      |        |                   |         |

|                  |                             |         |                   |         |
|------------------|-----------------------------|---------|-------------------|---------|
| <b>Fencing/:</b> |                             |         |                   |         |
| Type             | Satisfactory/Unsatisfactory | Comment | Corrective Action | CA Date |
| TANK BATTERY     | Satisfactory                |         |                   |         |
| SEPARATOR        | Satisfactory                |         |                   |         |
| WELLHEAD         | Satisfactory                |         |                   |         |

|                             |   |                             |         |                   |         |
|-----------------------------|---|-----------------------------|---------|-------------------|---------|
| <b>Equipment:</b>           |   |                             |         |                   |         |
| Type                        | # | Satisfactory/Unsatisfactory | Comment | Corrective Action | CA Date |
| Horizontal Heated Separator | 1 | Satisfactory                |         |                   |         |
| Gas Meter Run               | 3 | Satisfactory                |         |                   |         |
| Bird Protectors             | 1 | Satisfactory                |         |                   |         |
| Plunger Lift                | 1 | Satisfactory                |         |                   |         |

|                                   |   |                |                |                  |
|-----------------------------------|---|----------------|----------------|------------------|
| <b>Tanks/Berms:</b>               |   |                |                |                  |
| <input type="checkbox"/> New Tank |   | Tank ID: _____ |                |                  |
| Contents                          | # | Capacity       | Type           | SE GPS           |
| CRUDE OIL                         | 1 | 100 BBLS       | FIBERGLASS AST | ,                |
| S/U/V:                            |   | Comment:       |                |                  |
| Corrective Action:                |   |                |                | Corrective Date: |

|                        |          |
|------------------------|----------|
| <b>Paint</b>           |          |
| Condition              | Adequate |
| Other (Content) _____  |          |
| Other (Capacity) _____ |          |
| Other (Type) _____     |          |

|                   |          |                     |                     |                 |
|-------------------|----------|---------------------|---------------------|-----------------|
| <b>Berms</b>      |          |                     |                     |                 |
| Type              | Capacity | Permeability (Wall) | Permeability (Base) | Maintenance     |
| Earth             | Adequate | Walls Sufficent     | Base Sufficient     | Adequate        |
| Corrective Action |          |                     |                     | Corrective Date |
| Comment           |          |                     |                     |                 |

**Tanks/Berms:** ☐ New Tank Tank ID: \_\_\_\_\_

| Contents  | # | Capacity | Type      | SE GPS                |
|-----------|---|----------|-----------|-----------------------|
| CRUDE OIL | 1 | 300 BBLS | STEEL AST | 40.315990,-104.710290 |

|                    |  |                  |  |
|--------------------|--|------------------|--|
| S/U/V:             |  | Comment:         |  |
| Corrective Action: |  | Corrective Date: |  |

Paint

|           |          |
|-----------|----------|
| Condition | Adequate |
|-----------|----------|

Other (Content) \_\_\_\_\_

Other (Capacity) \_\_\_\_\_

Other (Type) \_\_\_\_\_

Berms

| Type  | Capacity | Permeability (Wall) | Permeability (Base) | Maintenance |
|-------|----------|---------------------|---------------------|-------------|
| Earth | Adequate | Walls Sufficient    | Base Sufficient     | Adequate    |

|                   |  |                 |  |
|-------------------|--|-----------------|--|
| Corrective Action |  | Corrective Date |  |
|-------------------|--|-----------------|--|

|         |  |
|---------|--|
| Comment |  |
|---------|--|

|                        |         |
|------------------------|---------|
| <b><u>Venting:</u></b> |         |
| Yes/No                 | Comment |
| NO                     |         |

|                        |                             |         |                   |         |
|------------------------|-----------------------------|---------|-------------------|---------|
| <b><u>Flaring:</u></b> |                             |         |                   |         |
| Type                   | Satisfactory/Unsatisfactory | Comment | Corrective Action | CA Date |
|                        |                             |         |                   |         |

**Predrill**

Location ID: 328883

**Site Preparation:**

Lease Road Adeq.: \_\_\_\_\_

Pads: \_\_\_\_\_

Soil Stockpile: \_\_\_\_\_

Corrective Action: \_\_\_\_\_

Date: \_\_\_\_\_ CDP Num.: \_\_\_\_\_

**Form 2A COAs:****Wildlife BMPs:****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:**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:**

Lat \_\_\_\_\_ Long \_\_\_\_\_

DWR Receipt Num: \_\_\_\_\_ Owner Name: \_\_\_\_\_ GPS : \_\_\_\_\_

**Field Parameters:**

Sample Location: \_\_\_\_\_

Emission Control Burner (ECB): \_\_\_\_\_

Comment: \_\_\_\_\_

Pilot: \_\_\_\_\_

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

Date Interim Reclamation Started: \_\_\_\_\_ Date Interim Reclamation Completed: \_\_\_\_\_

Land Use: \_\_\_\_\_

Comment: \_\_\_\_\_

1003a. Debris removed? \_\_\_\_\_ CM \_\_\_\_\_

CA \_\_\_\_\_ CA Date \_\_\_\_\_

Waste Material Onsite? \_\_\_\_\_ CM \_\_\_\_\_

CA \_\_\_\_\_ CA Date \_\_\_\_\_

Unused or unneeded equipment onsite? \_\_\_\_\_ CM \_\_\_\_\_

CA \_\_\_\_\_ CA Date \_\_\_\_\_

Pit, cellars, rat holes and other bores closed? \_\_\_\_\_ CM \_\_\_\_\_

CA \_\_\_\_\_ CA Date \_\_\_\_\_

Guy line anchors removed? \_\_\_\_\_ CM \_\_\_\_\_

CA \_\_\_\_\_ CA Date \_\_\_\_\_

Guy line anchors marked? \_\_\_\_\_ CM \_\_\_\_\_

CA \_\_\_\_\_ CA Date \_\_\_\_\_

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

1003c. Compacted areas have been cross ripped? \_\_\_\_\_

1003d. Drilling pit closed? \_\_\_\_\_ 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 \_\_\_\_\_

Inspector Name: MONTOYA, JOHN

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

**Storm Water:**

| Loc Erosion BMPs | BMP Maintenance | Lease Road Erosion BMPs | Lease BMP Maintenance | Chemical BMPs | Chemical BMP Maintenance | Comment |
|------------------|-----------------|-------------------------|-----------------------|---------------|--------------------------|---------|
|                  |                 |                         |                       |               |                          |         |

S/U/V: \_\_\_\_\_      Corrective Date: \_\_\_\_\_

Comment: \_\_\_\_\_

CA: \_\_\_\_\_