

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



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Inspection Date:
03/01/2012

Document Number:
667600071

Overall Inspection:
Satisfactory

FIELD INSPECTION FORM

Location Identifier	Facility ID	Loc ID	Tracking Type	Inspector Name:
	<u>418972</u>	<u>319409</u>		<u>HICKEY, MIKE</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
Kilcrease, Keith	/24135	keith.kilcrease@anadarko.com	Production Supertinent

Compliance Summary:

QtrQtr: SESW Sec: 35 Twp: 2N Range: 66W

Inspector Comment:

Routine inspection of new well API #05-123-32082, Badding 23-35.

Related Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	
66189	LEASE	PR	05/04/1998		-	UPRR 50 PAN AM I TRUE	
243415	WELL	PR	12/19/2001	GW	123-11206	UPRR 50 PAN AM I-TRUE 1	X
319409	LOCATION	AC	04/14/2009		-	BADDING 14-35SX	
418860	WELL	PR	10/13/2011	GW	123-32039	BADDING 13-35	X
418862	WELL	WO	11/22/2011		123-32040	BADDING 12-35SX	X
418863	WELL	WO	09/13/2011		123-32041	BADDING 13-35SX	X
418865	WELL	XX	08/20/2010		123-32042	BADDING 11-35SX	X
418866	WELL	PR	09/08/2011	DA	123-32043	BADDING 14-35X	X
418868	WELL	PR	10/13/2011	GW	123-32045	BADDING 12-35	X
418869	WELL	PR	10/13/2011	GW	123-32046	BADDING 22-35	X
418870	WELL	PR	10/13/2011	GW	123-32047	BADDING 11-35	X
418871	WELL	XX	08/20/2010		123-32048	BADDING 14-35SX	X
418904	WELL	PR	10/13/2011	GW	123-32063	BADDING 35-35	X
418905	WELL	PR	10/13/2011		123-32064	BADDING 34-35	X
418972	WELL	PR	10/13/2011	GW	123-32082	BADDING 23-35	X

Equipment:

Location Inventory

Inspector Name: HICKEY, MIKE

Special Purpose Pits: _____	Drilling Pits: _____	Wells: <u>13</u>	Production Pits: _____
Condensate Tanks: _____	Water Tanks: <u>2</u>	Separators: <u>13</u>	Electric Motors: _____
Gas or Diesel Mortors: _____	Cavity Pumps: _____	LACT Unit: _____	Pump Jacks: _____
Electric Generators: _____	Gas Pipeline: <u>1</u>	Oil Pipeline: _____	Water Pipeline: _____
Gas Compressors: _____	VOC Combustor: <u>1</u>	Oil Tanks: <u>13</u>	Dehydrator Units: _____
Multi-Well Pits: _____	Pigging Station: _____	Flare: <u>1</u>	Fuel Tanks: _____

Location

Signs/Marker:				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
WELLHEAD	Unsatisfactory		Install sign to comply with rule 210.b.	06/01/2012
BATTERY	Satisfactory			

Emergency Contact Number: (S/U/V) Unsatisfactory Corrective Date: 06/01/2012
 Comment: _____
 Corrective Action: Provide emergency contact info at the wellhead.

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

Equipment:					
Type	#	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
Plunger Lift	1	Satisfactory			

Tanks/Berms:				
<input type="checkbox"/> New Tank	Tank ID: _____			
Contents	#	Capacity	Type	SE GPS
CRUDE OIL				
S/U/V:	Comment: Shared battery. See inspection of API #05-123-32041 for battery/separator inspection.			
Corrective Action:				Corrective Date:

Paint

Condition	_____
Other (Content)	_____
Other (Capacity)	_____
Other (Type)	_____

Berms				
Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Corrective Action				Corrective Date
Comment				

Venting:	
Yes/No	Comment

Flaring:				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date

Predrill

Location ID: 319409

Site Preparation:

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

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

Form 2A COAs:

Group	User	Comment	Date
OGLA	koepsear	Location may be in a sensitive area due to shallow groundwater; therefore if drilling pits intercept groundwater the pit must be lined or a closed loop system used.	08/16/2010

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:

Well

Facility ID: 243415 API Number: 123-11206 Status: PR Insp. Status: PR

Facility ID: 418860 API Number: 123-32039 Status: PR Insp. Status: PR

Facility ID: 418862 API Number: 123-32040 Status: WO Insp. Status: WO

Facility ID: 418863 API Number: 123-32041 Status: WO Insp. Status: WO

Facility ID: 418865 API Number: 123-32042 Status: XX Insp. Status: XX

Facility ID: 418866 API Number: 123-32043 Status: PR Insp. Status: PR

Facility ID: <u>418868</u>	API Number: <u>123-32045</u>	Status: <u>PR</u>	Insp. Status: <u>PR</u>
Facility ID: <u>418869</u>	API Number: <u>123-32046</u>	Status: <u>PR</u>	Insp. Status: <u>PR</u>
Facility ID: <u>418870</u>	API Number: <u>123-32047</u>	Status: <u>PR</u>	Insp. Status: <u>PR</u>
Facility ID: <u>418871</u>	API Number: <u>123-32048</u>	Status: <u>XX</u>	Insp. Status: <u>XX</u>
Facility ID: <u>418904</u>	API Number: <u>123-32063</u>	Status: <u>PR</u>	Insp. Status: <u>PR</u>
Facility ID: <u>418905</u>	API Number: <u>123-32064</u>	Status: <u>PR</u>	Insp. Status: <u>PR</u>
Facility ID: <u>418972</u>	API Number: <u>123-32082</u>	Status: <u>PR</u>	Insp. Status: <u>PR</u>

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:

Emission Control Burner (ECB): _____

Comment: _____
 Pilot: _____ Wildlife Protection Devices (fired vessels): _____

Reclamation - Storm Water - Pit

Interim Reclamation:

Date Interim Reclamation Started: _____ Date Interim Reclamation Completed: _____

Land Use: RANGELAND

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: DRY LAND, RANGELAND _____

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

Storm Water:

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

Inspector Name: HICKEY, MIKE

S/U/V: _____	Corrective Date: _____
Comment: _____	
CA: _____	