

**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:

04/13/2012

Document Number:

661601099

Overall Inspection:

Satisfactory**FIELD INSPECTION FORM**

|                     |               |               |               |                      |
|---------------------|---------------|---------------|---------------|----------------------|
| Location Identifier | Facility ID   | Loc ID        | Tracking Type | Inspector Name:      |
|                     | <u>248950</u> | <u>329017</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: SENE Sec: 36 Twp: 4N Range: 67W

| Insp. Date | Doc Num   | Insp. Type | Insp Status | Satisfactory /Unsatisfactory | PA P/F/I | Pas/Fail (P/F) | Violation (Y/N) |
|------------|-----------|------------|-------------|------------------------------|----------|----------------|-----------------|
| 03/04/2002 | 200024771 | PR         | PR          | S                            |          | P              | N               |
| 08/08/2000 | 200008546 | PR         | PR          | S                            |          | P              | N               |
| 03/16/1994 | 500174060 |            | PR          |                              |          | P              | N               |

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

| Facility ID | Type     | Status | Status Date | Well Class | API Num   | Facility Name             |                                     |
|-------------|----------|--------|-------------|------------|-----------|---------------------------|-------------------------------------|
| 240160      | WELL     | PR     |             | OG         | 123-07948 | STATE OF COLORADO AC 1    | <input checked="" type="checkbox"/> |
| 248948      | WELL     | PR     |             |            | 123-16750 | HSR FELDMAN 1-36          | <input checked="" type="checkbox"/> |
| 248949      | WELL     | PR     |             |            | 123-16751 | HSR GRAHAM 2-36           | <input checked="" type="checkbox"/> |
| 248950      | WELL     | PR     | 02/10/1994  |            | 123-16752 | HSR HANCOCK 8-36          | <input checked="" type="checkbox"/> |
| 269971      | WELL     | PR     |             | OW         | 123-21793 | MARTINDALE STATE 7-36     | <input checked="" type="checkbox"/> |
| 329017      | LOCATION | AC     | 04/14/2009  |            | -         | HSR HANCOCK-64N67W 36SENE | <input type="checkbox"/>            |

**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 |
|----------------------|-----------------------------|---------|-------------------|---------|
| TANK LABELS/PLACARDS | Satisfactory                |         |                   |         |
| WELLHEAD             | Satisfactory                |         |                   |         |
| CONTAINERS           | Satisfactory                |         |                   |         |
| BATTERY              | Satisfactory                |         |                   |         |

Emergency Contact Number: (S/U/V) \_\_\_\_\_

Corrective Date: \_\_\_\_\_

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

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

**Spills:**

| Type | Area | Volume | Corrective action | CA Date |
|------|------|--------|-------------------|---------|
|------|------|--------|-------------------|---------|

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

| Type     | Satisfactory/Unsatisfactory | Comment   | Corrective Action | CA Date |
|----------|-----------------------------|-----------|-------------------|---------|
| OTHER    | Satisfactory                | combuster |                   |         |
| WELLHEAD | Satisfactory                |           |                   |         |

**Equipment:**

| Type                        | # | Satisfactory/Unsatisfactory | Comment | Corrective Action | CA Date |
|-----------------------------|---|-----------------------------|---------|-------------------|---------|
| Bird Protectors             | 4 | Satisfactory                |         |                   |         |
| Plunger Lift                | 5 | Satisfactory                |         |                   |         |
| Emission Control Device     | 1 | Satisfactory                |         |                   |         |
| Horizontal Heated Separator | 3 | Satisfactory                |         |                   |         |
| Gas Meter Run               | 3 | Satisfactory                |         |                   |         |

|                        |                             |                                   |                     |                       |  |
|------------------------|-----------------------------|-----------------------------------|---------------------|-----------------------|--|
| <b>Facilities:</b>     |                             | <input type="checkbox"/> New Tank |                     | Tank ID: _____        |  |
| Contents               | #                           | Capacity                          | Type                | SE GPS                |  |
| CRUDE OIL              | 2                           | 300 BBLS                          | STEEL AST           | 40.271360,-104.834820 |  |
| S/U/V:                 |                             |                                   | Comment:            |                       |  |
| Corrective Action:     |                             |                                   |                     | Corrective Date:      |  |
| <u>Paint</u>           |                             |                                   |                     |                       |  |
| Condition              | Adequate                    |                                   |                     |                       |  |
| Other (Content) _____  |                             |                                   |                     |                       |  |
| Other (Capacity) _____ |                             |                                   |                     |                       |  |
| Other (Type) _____     |                             |                                   |                     |                       |  |
| <u>Berms</u>           |                             |                                   |                     |                       |  |
| Type                   | Capacity                    | Permeability (Wall)               | Permeability (Base) | Maintenance           |  |
| Earth                  | Adequate                    | Walls Sufficient                  | Base Sufficient     | Adequate              |  |
| Corrective Action      |                             |                                   |                     | Corrective Date       |  |
| Comment                |                             |                                   |                     |                       |  |
| <b>Facilities:</b>     |                             | <input type="checkbox"/> New Tank |                     | Tank ID: _____        |  |
| Contents               | #                           | Capacity                          | Type                | SE GPS                |  |
| PRODUCED WATER         | 2                           | <50 BBLS                          | CONCRETE SUMP/VAULT | ,                     |  |
| S/U/V:                 |                             |                                   | Comment:            |                       |  |
| Corrective Action:     |                             |                                   |                     | Corrective Date:      |  |
| <u>Paint</u>           |                             |                                   |                     |                       |  |
| Condition              | Adequate                    |                                   |                     |                       |  |
| Other (Content) _____  |                             |                                   |                     |                       |  |
| Other (Capacity) _____ |                             |                                   |                     |                       |  |
| Other (Type) _____     |                             |                                   |                     |                       |  |
| <u>Berms</u>           |                             |                                   |                     |                       |  |
| Type                   | Capacity                    | Permeability (Wall)               | Permeability (Base) | Maintenance           |  |
| Earth                  | Adequate                    | Walls Sufficient                  | Base Sufficient     | Adequate              |  |
| Corrective Action      |                             |                                   |                     | Corrective Date       |  |
| Comment                |                             |                                   |                     |                       |  |
| <b>Venting:</b>        |                             |                                   |                     |                       |  |
| Yes/No                 | Comment                     |                                   |                     |                       |  |
| NO                     |                             |                                   |                     |                       |  |
| <b>Flaring:</b>        |                             |                                   |                     |                       |  |
| Type                   | Satisfactory/Unsatisfactory | Comment                           | Corrective Action   | CA Date               |  |
| Ignitor/Combustor      |                             |                                   |                     |                       |  |

**Predrill**

Location ID: 329017

**Site Preparation:**

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

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

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

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

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

**Form 2A COAs:****Comment:** \_\_\_\_\_**CA:** \_\_\_\_\_**Date:** \_\_\_\_\_**Wildlife BMPs:****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:**Well**

Facility ID: 240160 API Number: 123-07948 Status: PR Insp. Status: PR

Data retrieval failed for the subreport 'Subreport0' located at: \\dardensterling\FarmPa  
Data retrieval failed for the subreport 'Subreport10' located at: \\dardensterling\FarmPa

Facility ID: 248948 API Number: 123-16750 Status: PR Insp. Status: PR

Data retrieval failed for the subreport 'Subreport0' located at: \\dardensterling\FarmPa  
Data retrieval failed for the subreport 'Subreport10' located at: \\dardensterling\FarmPa

Facility ID: 248949 API Number: 123-16751 Status: PR Insp. Status: PR

Data retrieval failed for the subreport 'Subreport0' located at: \\dardensterling\FarmPa  
Data retrieval failed for the subreport 'Subreport10' located at: \\dardensterling\FarmPa

Facility ID: 248950 API Number: 123-16752 Status: PR Insp. Status: PR

Data retrieval failed for the subreport 'Subreport0' located at: \\dardensterling\FarmPa  
Data retrieval failed for the subreport 'Subreport10' located at: \\dardensterling\FarmPa

Facility ID: 269971 API Number: 123-21793 Status: PR Insp. Status: PR

Inspector Name: MONTOYA, JOHN

Data retrieval failed for the subreport 'Subreport1' located at: \\wdrdensterling\laFarmP  
Data retrieval failed for the subreport 'Subreport10' located at: \\wdrdensterling\laFarmP

### 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: \_\_\_\_\_ Wildlife Protection Devices (fired vessels): \_\_\_\_\_

### 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: \_\_\_\_\_

Inspector Name: MONTOYA, JOHN

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

#### **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: \_\_\_\_\_