

**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



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Inspection Date:

12/26/2012

Document Number:

667601013

Overall Inspection:

Satisfactory**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Tracking Type	Inspector Name:
	429595	327409		HICKEY, MIKE

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
Cocciolone, Ashley	720-929-6625	Ashley.Cocciolone@anadarko.com	
Avant, Paul	720-929-6457	Paul.Avant@anadarko.com	

Compliance Summary:

QtrQtr: NENE Sec: 29 Twp: 3N Range: 66W

Inspector Comment:

Drilling inspection of API #05-123-35847, Raymond #16N-29HZ et al seven well pad. 38C & 38N drilled to TD. Extreme rig 6 is on the 16N drilling at 11,450'. 37N next. 36N, 15N, and 15C have been drilled through the curve. This rig will move onto them after the 37N to drill the laterals.

Related Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	
246840	WELL	PR	06/04/2003	GW	123-14637	MILLER UPRR 31-29 #3	<input checked="" type="checkbox"/>
413270	WELL	PR	06/16/2010	OW	123-30632	MILLER 21-29	<input checked="" type="checkbox"/>
413283	WELL	PR	06/17/2008	OW	123-30641	MILLER 26-29	<input checked="" type="checkbox"/>
429588	WELL	DG	08/13/2012		123-35842	RAYMOND 38N-29HZX	<input checked="" type="checkbox"/>
429589	WELL	DG	08/22/2012		123-35843	RAYMOND 36N-29HZ	<input checked="" type="checkbox"/>
429590	WELL	DG	08/20/2012		123-35844	RAYMOND 15C-29HZ	<input checked="" type="checkbox"/>
429592	WELL	DG	08/13/2012		123-35845	RAYMOND 37N-29HZ	<input checked="" type="checkbox"/>
429594	WELL	DG	08/21/2012		123-35846	RAYMOND 15N-29HZ	<input checked="" type="checkbox"/>
429595	WELL	DG	08/13/2012		123-35847	RAYMOND 16N-29HZ	<input checked="" type="checkbox"/>
429596	WELL	DG	08/13/2012		123-35848	RAYMOND 38C-29HZ	<input checked="" type="checkbox"/>

Equipment:**Location Inventory**

Special Purpose Pits: _____	Drilling Pits: <u>2</u>	Wells: <u>10</u>	Production Pits: _____
Condensate Tanks: _____	Water Tanks: <u>5</u>	Separators: <u>10</u>	Electric Motors: <u>77</u>
Gas or Diesel Mortors: <u>4</u>	Cavity Pumps: _____	LACT Unit: <u>1</u>	Pump Jacks: _____
Electric Generators: <u>3</u>	Gas Pipeline: <u>1</u>	Oil Pipeline: _____	Water Pipeline: _____
Gas Compressors: <u>1</u>	VOC Combustor: <u>7</u>	Oil Tanks: <u>38</u>	Dehydrator Units: _____
Multi-Well Pits: _____	Pigging Station: _____	Flare: <u>9</u>	Fuel Tanks: <u>3</u>

Location

Inspector Name: HICKEY, MIKE

Signs/Marker:				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
DRILLING/RECOMP	Satisfactory			

Emergency Contact Number: (S/U/V) Satisfactory Corrective Date: _____

Comment: _____

Corrective Action: _____

Good Housekeeping:				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
OTHER	Satisfactory	Crew will address three bags of walnut shells (LCM) that were uncovered. All other drilling fluid additives were in a chemical storage container and were well ordered and neat.		

Spills:				
Type	Area	Volume	Corrective action	CA Date

☐ Multiple Spills and Releases?

Facilities:		<input type="checkbox"/> New Tank	Tank ID: _____			
Contents		#	Capacity	Type	SE GPS	
CRUDE OIL		1	400 BBLS	STEEL AST	,	
S/U/V:				Comment:		
Corrective Action:					Corrective Date:	

Paint

Condition	
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Other (Content) _____

Other (Capacity) _____

Other (Type) _____

Berms

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

Inspector Name: HICKEY, MIKE

Facilities:		<input type="checkbox"/> New Tank		Tank ID: _____	
Contents	#	Capacity	Type	SE GPS	
PRODUCED WATER	2	200 BBLS	PBV FIBERGLASS		
S/U/V:			Comment:		
Corrective Action:			Corrective Date:		
<u>Paint</u>					
Condition					
Other (Content) _____					
Other (Capacity) _____					
Other (Type) _____					
<u>Berms</u>					
Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance	
Corrective Action			Corrective Date		
Comment					
Facilities:		<input type="checkbox"/> New Tank		Tank ID: _____	
Contents	#	Capacity	Type	SE GPS	
CRUDE OIL	7	300 BBLS	STEEL AST	40.201610,104.798990	
S/U/V:	Satisfactory		Comment:	Production facilities are under construction	
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	
Metal	Adequate	Walls Sufficient	Base Sufficient	Adequate	
Corrective Action			Corrective Date		
Comment					
Venting:					
Yes/No	Comment				
Flaring:					
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date	
Field Flare	Satisfactory	Drilling crew operating field flare for routine flaring.			

Predrill

Location ID: 327409

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:**

Erosion BMPs

Present

Other BMPs

Present

Corrective Action: _____ Date: _____

Comments: Erosion BMPs: _____

Other BMPs: _____

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: 246840 Type: WELL API Number: 123-14637 Status: PR Insp. Status: TA

Idle Well

Purpose: ☐ Shut In ☒ Temporarily Abandoned Reminder: _____
 S/V: Satisfactory CA Date: _____
 CA: _____
 Comment: T/A waiting for adjacent completion activities.

Facility ID: 413270 Type: WELL API Number: 123-30632 Status: PR Insp. Status: TA

Facility ID: 413283 Type: WELL API Number: 123-30641 Status: PR Insp. Status: TA

Facility ID: 429588 Type: WELL API Number: 123-35842 Status: DG Insp. Status: WO

Idle Well

Purpose: ☒ Shut In ☐ Temporarily Abandoned Reminder: _____
 S/V: _____ CA Date: _____
 CA: _____
 Comment: _____

Facility ID: 429589 Type: WELL API Number: 123-35843 Status: DG Insp. Status: SI

Facility ID: 429590 Type: WELL API Number: 123-35844 Status: DG Insp. Status: SI

Facility ID: 429592 Type: WELL API Number: 123-35845 Status: DG Insp. Status: ND

Facility ID: 429594 Type: WELL API Number: 123-35846 Status: DG Insp. Status: SI

Facility ID: 429595 Type: WELL API Number: 123-35847 Status: DG Insp. Status: DG

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:

Facility ID: 429596 Type: WELL API Number: 123-35848 Status: DG Insp. Status: WO

Idle Well

Purpose: ☒ Shut In ☐ Temporarily Abandoned Reminder: _____
 S/V: _____ CA Date: _____
 CA: _____
 Comment: _____

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: DRY LAND, 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? _____

Inspector Name: HICKEY, MIKE

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 _____ In Process _____

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 _____

Multi-Well Location ☐

Storm Water:

Loc Erosion BMPs	BMP Maintenance	Lease Road Erosion BMPs	Lease BMP Maintenance	Chemical BMPs	Chemical BMP Maintenance	Comment
Ditches	Pass	Gravel	Pass			

S/U/V: Satisfactory _____ Corrective Date: _____

Comment: _____

CA: _____