

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:
03/21/2013

Document Number:
667601228

Overall Inspection:
Unsatisfactory

FIELD INSPECTION FORM

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	<u>299851</u>	<u>336498</u>	<u>HICKEY, MIKE</u>	<input type="checkbox"/>	

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: SESW Sec: 33 Twp: 3N Range: 68W

Inspector Comment:

First time inspection of API #05-123-29549 et al multi-well location. Tank berm area has multiple locations with oil stained soils.

Related Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	
299783	WELL	PR	08/06/2009	OW	123-29522	NEWBY 14-33	X
299784	WELL	PR	06/18/2009	OW	123-29523	NEWBY 19-33	X
299785	WELL	PR	08/25/2009	OW	123-29524	NEWBY 12-33	X
299786	WELL	PR	06/21/2009	OW	123-29525	NEWBY 13-33	X
299787	WELL	PR	06/12/2009	OW	123-29526	NEWBY 11-33	X
299851	WELL	PR	09/01/2009	OW	123-29549	NEWBY 23-33	X
299852	WELL	PR	06/18/2009	OW	123-29550	NEWBY 25-33	X
299853	WELL	PR	09/23/2009	OW	123-29551	NEWBY 22-33	X

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
WELLHEAD	Satisfactory			

Inspector Name: HICKEY, MIKE

BATTERY	Satisfactory	X8		
TANK LABELS/PLACARDS	Satisfactory			

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

Comment: _____

Corrective Action: _____

Good Housekeeping:

Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
TRASH	Unsatisfactory		Remove oil soaked rag from within the tank berm	04/04/2013

Spills:

Type	Area	Volume	Corrective action	CA Date
Crude Oil	Tank	<= 5 bbls	Clean up oil stained soils within the tank berm.	04/04/2013

Multiple Spills and Releases?

Fencing/:

Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
WELLHEAD	Satisfactory	8 wells fenced together.		
SEPARATOR	Satisfactory			
IGNITOR/COMBUSTOR	Satisfactory			
TANK BATTERY	Satisfactory			

Equipment:

Type	#	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
Horizontal Heated Separator	2	Satisfactory			
Bird Protectors	3	Satisfactory			
Plunger Lift	8	Satisfactory			
Gas Meter Run	1	Satisfactory			
Emission Control Device	1	Satisfactory			

Facilities: New Tank Tank ID: _____

Contents	#	Capacity	Type	SE GPS
PRODUCED WATER	1	OTHER	PBV FIBERGLASS	,

S/U/V: **Unsatisfactory** Comment: _____

Corrective Action: Clean up spills and oil stained soils at the produced water tank. Corrective Date: 04/04/2013

Paint

Condition	Adequate
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Other (Content) _____

Other (Capacity) 210 Bbl. _____

Other (Type) _____

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance

Corrective Action _____ Corrective Date _____

Comment _____

Facilities: New Tank Tank ID: _____

Contents	#	Capacity	Type	SE GPS
CRUDE OIL	5	OTHER	STEEL AST	40.181810,105.008060

S/U/V: **Unsatisfactory** Comment: _____

Corrective Action: Repair leaks in the tank manifold and clean up all oil stained soils within the tank berm. Corrective Date: 04/04/2013

Paint

Condition	Adequate
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Other (Content) _____

Other (Capacity) 315 Bbl. _____

Other (Type) _____

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Metal	Adequate	Walls Sufficent	Base Sufficient	Adequate

Corrective Action _____ Corrective Date _____

Comment _____

Venting:

Yes/No	Comment
NO	

Flaring:

Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
Ignitor/Combustor	Satisfactory			

Predrill

Location ID: 336498

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: 299783 Type: WELL API Number: 123-29522 Status: PR Insp. Status: PR

Producing Well

Comment: _____

Facility ID: 299784 Type: WELL API Number: 123-29523 Status: PR Insp. Status: PR

Producing Well

Comment: _____

Facility ID: 299785 Type: WELL API Number: 123-29524 Status: PR Insp. Status: PR

Producing Well

Comment: _____

Facility ID: 299786 Type: WELL API Number: 123-29525 Status: PR Insp. Status: PR

Producing Well

Comment: _____

Facility ID: 299787 Type: WELL API Number: 123-29526 Status: PR Insp. Status: PR

Producing Well

Comment: _____

Facility ID: 299851 Type: WELL API Number: 123-29549 Status: PR Insp. Status: PR

Producing Well

Comment: _____

Facility ID: 299852 Type: WELL API Number: 123-29550 Status: PR Insp. Status: PR

Producing Well

Comment: _____

Facility ID: 299853 Type: WELL API Number: 123-29551 Status: PR Insp. Status: PR

Producing Well

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: _____

Comment: _____

1003a. Debris removed? Pass CM _____
CA _____ CA Date _____

Waste Material Onsite? Fail CM _____

CA Remove oil soaked rag from within the tank berm. CA Date 04/04/2013

Unused or unneeded equipment onsite? Pass 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? Pass Production areas stabilized? Pass

1003c. Compacted areas have been cross ripped? Pass

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? Pass

Production areas have been stabilized? Pass Segregated soils have been replaced? Pass

RESTORATION AND REVEGETATION

Cropland

Top soil replaced Pass Recontoured Pass Perennial forage re-established Pass

Non-Cropland

Top soil replaced _____ Recontoured _____ 80% Revegetation _____

1003 f. Weeds Noxious weeds? P

Comment: _____

Overall Interim Reclamation Pass

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 _____

Inspector Name: HICKEY, MIKE

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
Seeding	Pass	Gravel	Pass			

S/U/V: Satisfactory _____

Corrective Date: _____

Comment:

CA: