

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:
03/26/2013

Document Number:
669400525

Overall Inspection:
Satisfactory

FIELD INSPECTION FORM

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	<input type="checkbox"/>
	<u>427307</u>	<u>427297</u>	<u>LABOWSKIE, STEVE</u>	2A Doc Num:	

Operator Information:

OGCC Operator Number: 46685 Name of Operator: KINDER MORGAN CO2 CO LP
 Address: 17801 HWY 491
 City: CORTEZ State: CO Zip: 81321

Contact Information:

Contact Name	Phone	Email	Comment
Clayton, Bob	(970) 882-5507/ (303) 585-1309	bob_clayton@kindermorgan.com	Operations Superintendent (Dolores)

Compliance Summary:

QtrQtr: NESW Sec: 15 Twp: 40N Range: 18W

Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Unsatisfactory	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
09/28/2012	669400146	XX	UN	V	I		Y
04/16/2012	664000476	XX	DG	S			N

Inspector Comment:

completion equipment and flowback tanks hooked up, no personnel present at time of inspection.

Related Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name
427014	PIT	AC	12/30/2011		-	DC 11
427307	WELL	XX	01/15/2012	LO	033-06171	DOE CANYON 11

Equipment:

Location Inventory

Special Purpose Pits: _____	Drilling Pits: <u>2</u>	Wells: <u>1</u>	Production Pits: _____
Condensate Tanks: _____	Water Tanks: <u>2</u>	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: <u>1</u>

Location

Signs/Marker:

Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
CONTAINERS		unlabeled plastic tank near wellhead		

TANK LABELS/PLACARDS		flow back tanks need appropriate contents, capacity and NFPA if holding flowback fluid		
WELLHEAD	Satisfactory			

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

Comment: _____

Corrective Action: _____

Spills:

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

Equipment:

Type	#	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
Flow Line	1	Satisfactory			

Venting:

Yes/No	Comment

Flaring:

Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date

Predrill

Location ID: 427297

Site Preparation:

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

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

Form 2A COAs:

Group	User	Comment	Date
OGLA	kubeczkod	<p>SITE SPECIFIC COAs:</p> <p>Either a lined drilling pit or closed loop system must be implemented.</p> <p>Production pit/special purpose pit must be lined.</p> <p>Operator must ensure 110 percent secondary containment for any volume of fluids contained at well site during drilling and completion operations; including, but not limited to, construction of a berm or diversion dike, diversion/collection trenches within and/or outside of berms/dikes, site grading, or other comparable measures (i.e., best management practices (BMPs) associated with stormwater management) sufficiently protective of nearby surface water. Any berm constructed at the well pad location will be stabilized, inspected at regular intervals, and maintained in good condition.</p> <p>Operator must implement best management practices to contain any unintentional release of fluids, including any fluids conveyed via temporary surface pipelines or buried permanent pipelines.</p> <p>Flowback and stimulation fluids must be sent to tanks, separators, or other containment/filtering equipment before the fluids can be placed into any pipeline or pit located on the well pad or into tanker trucks for offsite disposal. The flowback and stimulation fluid tanks, separators, or other containment/filtering equipment must be placed on the well pad in an area with additional downgradient perimeter berming. The area where flowback fluids will be stored/reused must be constructed to be sufficiently impervious to contain any spilled or released material.</p> <p>The moisture content of any drill cuttings in a cuttings pit, trench, or pile shall be as low as practicable to prevent accumulation of liquids greater than de minimis amounts prior to offsite disposal.</p> <p>No portion of any pit that will be used to hold liquids shall be constructed on fill material, unless the pit and fill slope are designed and certified by a professional engineer, subject to review and approval by the director prior to construction of the pit. The construction and lining of the pit shall be supervised by a professional engineer or their agent. The entire base of the pit must be in cut.</p> <p>All personnel must be H2S trained and proper air monitoring for H2S must be implemented during drilling, completion, and production operations. Emergency response plan for H2S must be onsite at all times.</p>	12/12/2011

Comment:

CA: **Date:** _____

Wildlife BMPs:

BMP Type	Comment
Storm Water/Erosion Control	Disturbed portions of the well pad not necessary for operation and maintenance of the well would be re-contoured and roughened to blend into the surrounding terrain. In addition, a land-owner approved seed mix would be applied at the appropriate time using seeding and mulching methods outlined in the Kinder Morgan Programmatic Stormwater Management Plan.
Storm Water/Erosion Control	Fiber wattles will encompass the entire western periphery of the well pad and will continue wrapping approximately 30 feet of the southern periphery

Comment:

CA: **Date:** _____

Stormwater:

Erosion BMPs	Present	Other BMPs	Present
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WADDLES	Yes	Material Handling And Spill Prevention	Yes`	
Corrective Action: _____		Date: _____		
Comments: Erosion BMPs: _____				
Other BMPs: _____				
Comment: _____				
Staking:				
On Site Inspection (305):				
<u>Surface Owner Contact Information:</u>				
Name: _____		Address: _____		
Phone Number: _____		Cell Phone: _____		
<u>Operator Rep. Contact Information:</u>				
Landman Name: _____		Phone Number: _____		
Date Onsite Request Received: _____		Date of Rule 306 Consultation: _____		
Request LGD Attendance: _____				
<u>LGD Contact Information:</u>				
Name: _____		Phone Number: _____		Agreed to Attend: _____
<u>Summary of Landowner Issues:</u>				
<u>Summary of Operator Response to Landowner Issues:</u>				
<u>Onsite Inspection Memorandum Summarizing Discussions at Inspection as Attachment:</u>				

Facility				
Facility ID: 427307	Type: WELL	API Number: 033-06171	Status: XX	Insp. Status: WO

Well Stimulation	
Stimulation Company: _____	Stimulation Type: _____
Other: _____	
Maximum Casing Recorded: _____ PSI	Tubing: _____
Surface: _____	Intermediate: _____
Production: _____	Instantaneous Shut-In Pressure (ISIP) _____
Bradenhead Psi: _____	Frac Flow Back: Fluid: _____ Gas: _____

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: CRP, DRY LAND

Comment: _____

1003a. Debris removed? Pass CM _____

CA _____ CA Date _____

Waste Material Onsite? Pass CM _____

CA _____ CA Date _____

Unused or unneeded equipment onsite? Pass CM _____

CA _____ CA Date _____

Pit, cellars, rat holes and other bores closed? Pass 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? In Production areas stabilized? Pass

1003c. Compacted areas have been cross ripped? _____

1003d. Drilling pit closed? Pass Subsidence over on drill pit? In

Cuttings management: _____

1003e. Areas no longer needed for drilling or subsequent operations for have been re-vegetated to 80% of pre-existing? In

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

RESTORATION AND REVEGETATION

Cropland

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

Non-Cropland

Top soil replaced In Recontoured In 80% Revegetation In

1003 f. Weeds Noxious weeds? _____ P _____

Comment: _____

Overall Interim Reclamation In Process

Final Reclamation/ Abandoned Location:

Date Final Reclamation Started: _____ Date Final Reclamation Completed: _____

Final Land Use: DRY LAND

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
Tackifiers	Pass	Check Dams	Pass			
Berms	Pass	Compaction	Pass			
Waddles	Pass					
Compaction	Pass	Waddles	Pass			

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

Comment: lease road might need another culvert or some more erosion control BMPs at head of small drainage going to the south, some soil erosion observed off access.

CA: _____

Permit:	Facility ID	Permit Num	Expiration Date
	427014	1642077	