


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		DE ET OE ES
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Inspection Date: <p style="text-align: center;"><u>08/09/2013</u></p> Document Number: <p style="text-align: center;"><u>668300667</u></p> Overall Inspection: <p style="text-align: center;"><u>Satisfactory</u></p>
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Location Identifier	Facility ID <u>427877</u>	Loc ID <u>427876</u>	Inspector Name: <u>JOHNSON, RANDELL</u>	On-Site Inspection <input type="checkbox"/>
			2A Doc Num: _____	

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
Avant, Paul	O:720-929-6457, C:720-273-2688	paul.avant@anadarko.com	Rockies Regulatory Affairs

Compliance Summary:

QtrQtr: SWSW Sec: 31 Twp: 3N Range: 65W

Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Unsatisfactory	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
05/07/2012	667600272	XX	DG	S			N

Inspector Comment:

Related Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	
427869	WELL	PR	09/30/2012	OW	123-35140	CAMP 3N-31HZX	X
427874	WELL	PR	11/14/2012	LO	123-35143	CAMP 29N-31HZ	X
427875	WELL	PR	11/12/2012	LO	123-35144	CAMP FEDERAL 30C-31HZ	X
427877	WELL	PR	11/12/2012	LO	123-35145	CAMP FEDERAL 30N-31HZ	X
427879	WELL	PR	11/14/2012	LO	123-35147	CAMP 4N-31HZ	X

Equipment: Location Inventory

Special Purpose Pits: _____	Drilling Pits: <u>2</u>	Wells: <u>5</u>	Production Pits: _____
Condensate Tanks: _____	Water Tanks: <u>5</u>	Separators: <u>5</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>5</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
BATTERY	Unsatisfactory	All well signs that the battery services are not posted at the site - i.e., HSR-Lloyd Camp 14-31 and Camp 35-31	Install sign to comply with rule 210.d.	09/09/2013
WELLHEAD	Satisfactory			
TANK LABELS/PLACARDS	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?				

Fencing/:				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
WELLHEAD	Satisfactory	Pipe fencing		
OTHER	Satisfactory	Barbed wire fencing around separators, meter runs, ECD's, VRU's, auxiliary buildings, breaker panels, electrical transformers and pig stations		
TANK BATTERY	Satisfactory	Barbed wire fencing		

Equipment:					
Type	#	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
Plunger Lift	1	Satisfactory	SE corner of fence around Camp Federal 30N-31HZ wellhead 40.17594, - 104.71131		
Gas Meter Run	3	Satisfactory	Pipeline meter runs/SE corner of fence around separators, meter runs, ECD's, pig station and VRU's 40.17650, - 104.71183		
Pig Station	1	Satisfactory	SE corner of fence around auxiliary buildings, pig station and transformer 40.17649, - 104.71088		

Ancillary equipment	1	Satisfactory	Electrical transformer on concrete slab/SE corner of fence around auxiliary buildings, pig station and transformer 40.17649, - 104.71088		
Ancillary equipment		Satisfactory	VRU's and associated breaker panels/SE corner of fence around separators, meter runs, ECD's, pig station and VRU's 40.17650, - 104.71183		
Plunger Lift	1	Satisfactory	SE corner of fence around Camp Federal 29N-31HZ wellhead 40.17593, - 104.71101		
Horizontal Heated Separator	6	Satisfactory	SE corner of fence around separators, meter runs, ECD's, pig station and VRU's 40.17650, - 104.71183		
Plunger Lift	1	Satisfactory	SE corner of fence around Camp Federal 3N-31HZX wellhead 40.17594, - 104.71091		
Plunger Lift	1	Satisfactory	SE corner of fence around Camp Federal 4N-31HZ wellhead 40.17593, - 104.71111		
Emission Control Device	4	Satisfactory	SE corner of fence around separators, meter runs, ECD's, pig station and VRU's 40.17650, - 104.71183		
Bird Protectors	10	Satisfactory	Heated separators and ECD's		
Gas Meter Run	6	Satisfactory	Check meters on outlets of separators/SE corner of fence around separators, meter runs, ECD's, pig station and VRU's 40.17650, - 104.71183		

Ancillary equipment	2	Satisfactory	Auxiliary buildings/SE corner of fence around auxiliary buildings, pig station and transformer 40.17649, - 104.71088		
Pig Station	1	Satisfactory	SE corner of fence around separators, meter runs, ECD's, pig station and VRU's 40.17650, - 104.71183		
Plunger Lift	1	Satisfactory	SE corner of fence around Camp Federal 30C-31HZ wellhead 40.17594, - 104.71121		

Facilities: New Tank Tank ID: _____

Contents	#	Capacity	Type	SE GPS
			CENTRALIZED BATTERY	40.176490,-104.711010

S/U/V: Satisfactory Comment: Centralized battery services Camp Federal 30N-31HZ, 30C-31HZ, Camp 4N-31HZ, 29N-31HZ, 3N-31HZX, HSR-Lloyd Camp 14-31, Camp 35-31

Corrective Action: _____ Corrective Date: _____

Paint

Condition Adequate

Other (Content) _____

Other (Capacity) _____

Other (Type) _____

Berms

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

Corrective Action _____ Corrective Date _____

Comment _____

Facilities:		<input type="checkbox"/> New Tank	Tank ID: _____		
Contents	#	Capacity	Type	SE GPS	
CRUDE OIL	1	300 BBLS	STEEL AST	40.176490,-104.711010	
S/U/V:	Satisfactory		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	
Metal	Adequate	Walls Sufficient	Base Sufficient	Adequate	
Corrective Action				Corrective Date	
Comment					

Facilities:		<input type="checkbox"/> New Tank	Tank ID: _____		
Contents	#	Capacity	Type	SE GPS	
CRUDE OIL	2	400 BBLS	STEEL AST	40.176490,-104.711010	
S/U/V:	Satisfactory		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	
Metal	Adequate	Walls Sufficient	Base Sufficient	Adequate	
Corrective Action				Corrective Date	
Comment					

Facilities:		<input type="checkbox"/> New Tank	Tank ID: _____	
Contents	#	Capacity	Type	SE GPS
PRODUCED WATER	3	OTHER	PBV FIBERGLASS	40.176490,-104.711010
S/U/V:	Satisfactory		Comment:	210 bbls
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				

Facilities:		<input type="checkbox"/> New Tank	Tank ID: _____	
Contents	#	Capacity	Type	SE GPS
CRUDE OIL	8	OTHER	STEEL AST	40.176490,-104.711010
S/U/V:	Satisfactory		Comment:	537 bbls
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
NO	

Flaring:				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date

Predrill

Location ID: 427876

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: 427869 Type: WELL API Number: 123-35140 Status: PR Insp. Status: PR

Producing Well

Comment: PR

Facility ID: 427874 Type: WELL API Number: 123-35143 Status: PR Insp. Status: PR

Producing Well

Comment: PR

Facility ID: 427875 Type: WELL API Number: 123-35144 Status: PR Insp. Status: PR

Producing Well

Comment: PR

Facility ID: 427877 Type: WELL API Number: 123-35145 Status: PR Insp. Status: PR

Producing Well

Comment: PR

Facility ID: 427879 Type: WELL API Number: 123-35147 Status: PR Insp. Status: PR

Producing Well

Comment: PR

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? 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? Pass 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? _____

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? _____

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? P

Comment: _____

Overall Interim Reclamation Pass

Final Reclamation/ Abandoned Location:

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

Final Land Use: 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
Compaction	Pass	Compaction	Pass			
Other	Pass	Other	Pass			Vegetation
Gravel	Pass	Gravel	Pass			

S/U/V: Satisfactory Corrective Date: _____

Comment: _____

CA: _____