

Inspector Name: Gomez, Jason

**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:

11/20/2013

Document Number:

673800219

Overall Inspection:

Satisfactory**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection
	<u>293814</u>	<u>333268</u>	<u>Gomez, Jason</u>	<input type="checkbox"/> 2A Doc Num: _____

Operator Information:

OGCC Operator Number:

Name of Operator: KERR-MCGEE OIL & GAS ONSHORE LPAddress: P O BOX 173779City: DENVER State: CO Zip: 80217-

- ☐ THIS IS A FOLLOW UP INSPECTION
- ☐ FOLLOW UP INSPECTION REQUIRED
- ☐ NO FOLLOW UP INSPECTION REQUIRED
- ☐ INSPECTOR REQUESTS FORM 42 WHEN CORRECTIVE ACTIONS ARE COMPLETED

Contact Information:

Contact Name	Phone	Email	Comment
PRECUP, JIM		james.precup@state.co.us	
Avant, Paul	720-929-6457	Paul.Avant@Anadarko.com	

Compliance Summary:QtrQtr: SESW Sec: 28 Twp: 6N Range: 67W**Inspector Comment:****Related Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status	
293814	WELL	PR	07/08/2008	OW	123-26627	POUDRE 11-28	FR	<input checked="" type="checkbox"/>
293815	WELL	PR	07/08/2008	OW	123-26628	POUDRE 10-28	FR	<input checked="" type="checkbox"/>
293816	WELL	PR	07/10/2008	OW	123-26629	POUDRE 19-28	FR	<input checked="" type="checkbox"/>
293818	WELL	PR	07/08/2008	OW	123-26631	POUDRE 14-28	FR	<input checked="" type="checkbox"/>
293837	WELL	PR	06/12/2008	OW	123-26633	POUDRE 36-28	FR	<input checked="" type="checkbox"/>
293880	WELL	PR	06/23/2008	OW	123-26630	POUDRE 15-28	FR	<input checked="" type="checkbox"/>
294040	WELL	PR	07/08/2008	OW	123-26680	POUDRE 25-28	FR	<input checked="" type="checkbox"/>
294041	WELL	PR	07/08/2008	OW	123-26679	POUDRE 23-28	FR	<input checked="" type="checkbox"/>

Equipment:Location Inventory

Special Purpose Pits: _____	Drilling Pits: _____	Wells: _____	Production Pits: _____
Condensate Tanks: _____	Water Tanks: _____	Separators: _____	Electric Motors: _____
Gas or Diesel Motors: _____	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	Poudre 36-28		
WELLHEAD	Satisfactory	Poudre 15-28		
TANK LABELS/PLACARDS	Satisfactory			
WELLHEAD	Satisfactory	Poudre 19-28		
WELLHEAD	Satisfactory	Poudre 14-28		
WELLHEAD	Satisfactory	Poudre 10-28		
BATTERY	Satisfactory			
WELLHEAD	Satisfactory	Poudre 11-28		
WELLHEAD	Satisfactory	Poudre 23-28		
WELLHEAD	Satisfactory	Poudre 25-28		

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

Comment: _____

Corrective Action: _____

Good Housekeeping:				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
UNUSED EQUIPMENT	Unsatisfactory	Extra steel pannel on site adajacent to easternmost plunger lift.	Submit Repair plan to COGCC./Remove pannels	12/20/2013

Spills:				
Type	Area	Volume	Corrective action	CA Date

☐ Multiple Spills and Releases?

Fencing/:				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
WELLHEAD	Satisfactory	Poudre 19-28	pannel fencing	
WELLHEAD	Satisfactory	Poudre 25-28	pannel fencing	
WELLHEAD	Satisfactory	Poudre 11-28	pannel fencing	
WELLHEAD	Satisfactory	Poudre 15-28	Pannel fencing	
WELLHEAD	Satisfactory	Poudre 10-28	pannel fencing	
WELLHEAD	Satisfactory	Poudre 23-28/14-28/36-28	Chain link	

Equipment:					
Type	#	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
Pig Station	1	Satisfactory			
Plunger Lift	7	Satisfactory			
Prime Mover	1	Satisfactory	Electric mover		
Bird Protectors	6	Satisfactory			
Ancillary equipment	1	Satisfactory	Telemetry		

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Horizontal Heated Separator	4	Satisfactory	in secondary containment and placarded		
Emission Control Device	2	Satisfactory			
Ancillary equipment	3	Satisfactory	Electrical control boxes		
VRU	1	Satisfactory			
Pump Jack	1	Satisfactory			
Compressor	1	Satisfactory			
Horizontal Separator	1	Satisfactory			
Gas Meter Run	1	Satisfactory			

Facilities: ☐ New Tank Tank ID: _____

Contents	#	Capacity	Type	SE GPS
METHANOL	1	OTHER	STEEL AST	40.453430,-104.900160

S/U/V:	Satisfactory	Comment:	
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Corrective Action:		Corrective Date:	
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Paint

Condition	Adequate
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Other (Content) _____

Other (Capacity) 55 gal _____

Other (Type) _____

Berms

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

Corrective Action		Corrective Date	
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Comment	
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Facilities: ☐ New Tank Tank ID: _____

Contents	#	Capacity	Type	SE GPS
PRODUCED WATER	1	OTHER	PBV FIBERGLASS	40.442920,-104.803860

S/U/V:	Satisfactory	Comment:	
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Corrective Action:		Corrective Date:	
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Paint

Condition	Adequate
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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	
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Comment	
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Facilities:		<input type="checkbox"/> New Tank		Tank ID: _____	
Contents	#	Capacity	Type	SE GPS	
CRUDE OIL	4	OTHER	STEEL AST	40.442920,-104.803860	
S/U/V:	Satisfactory		Comment:		
Corrective Action:				Corrective Date:	
Paint					
Condition	Adequate				
Other (Content) _____					
Other (Capacity) 286 bbls _____					
Other (Type) _____					
Berms					
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: 293814

Site Preparation:

Lease Road Adeq.: _____

Pads: _____

Soil Stockpile: _____

S/U/V: _____

Corrective Action: _____

Date: _____ CDP Num.: _____

Form 2A COAs:**S/U/V:** _____ **Comment:** _____**CA:** _____ **Date:** _____**Wildlife BMPs:****S/U/V:** _____ **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:**Facility**

Facility ID: 293814 Type: WELL API Number: 123-26627 Status: PR Insp. Status: FR

Producing Well

Comment: PR

Facility ID: 293815 Type: WELL API Number: 123-26628 Status: PR Insp. Status: FR

Producing Well

Comment: PR

Facility ID: 293816 Type: WELL API Number: 123-26629 Status: PR Insp. Status: FR

Producing Well

Comment: PR

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Facility ID: 293818 Type: WELL API Number: 123-26631 Status: PR Insp. Status: FR

Producing Well

Comment: PR

Facility ID: 293837 Type: WELL API Number: 123-26633 Status: PR Insp. Status: FR

Producing Well

Comment: PR

Facility ID: 293880 Type: WELL API Number: 123-26630 Status: PR Insp. Status: FR

Producing Well

Comment: PR

Facility ID: 294040 Type: WELL API Number: 123-26680 Status: PR Insp. Status: FR

Producing Well

Comment: PR

Facility ID: 294041 Type: WELL API Number: 123-26679 Status: PR Insp. Status: FR

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:

Comment:

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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? Pass

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

RESTORATION AND REVEGETATION

Cropland

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

Non-Cropland

Top soil replaced Pass Recontoured Pass 80% Revegetation Pass

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 _____

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: _____

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Corrective Action: Date

Overall Final Reclamation ☐ Well Release on Active Location ☐ Multi-Well Location ☐

Storm Water:

Loc Erosion BMPs	BMP Maintenance	Lease Road Erosion BMPs	Lease BMP Maintenance	Chemical BMPs	Chemical BMP Maintenance	Comment
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

S/U/V: Satisfactory Corrective Date:

Comment:

CA:

Pits: ☐ NO SURFACE INDICATION OF PIT

Attached Documents

You can go to COGCC Images (<https://cogcc.state.co.us/weblink/>) and search by document number:

Document Num	Description	URL
673800219	INSPECTION APPROVED	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3233041