

**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:

02/12/2014

Document Number:

671100038

Overall Inspection:

Satisfactory**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	420929	332832	MONTOYA, JOHN	<input type="checkbox"/>	

Operator Information:

OGCC Operator Number:

Name of Operator: K P KAUFFMAN COMPANY INCAddress: 1675 BROADWAY, STE 2800City: DENVER State: CO Zip: 80202

- ☐ 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
LEONARD, MIKE		mike.leonard@state.co.us	
Lara-Mesa, Susana	303-825-4822	slaramesa@kpk.com	Eng'g Project Mgr

Compliance Summary:QtrQtr: NESW Sec: 17 Twp: 4N Range: 66W**Inspector Comment:****NO FLOOD DAMAGE OUT OF FLOOD PLAIN****Related Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status	
295716	WELL	PR	11/09/2011	OW	123-25792	FR-LORENZ #11-17-11	FR	<input checked="" type="checkbox"/>
295717	WELL	XX	12/17/2012	LO	123-25791	Front Range 11-17-25R	XX	<input type="checkbox"/>
420924	WELL	XX	12/17/2012	LO	123-32750	Front Range 11-17-24	XX	<input type="checkbox"/>
420925	WELL	PR	11/09/2011	OW	123-32751	Front Range #11-17-5	FR	<input checked="" type="checkbox"/>
420927	WELL	XX	12/17/2012	LO	123-32753	Front Range 11-17-17	XX	<input type="checkbox"/>
420928	WELL	PR	11/09/2011	OW	123-32754	Front Range #11-17-6	FR	<input checked="" type="checkbox"/>
420929	WELL	PR	09/05/2012	LO	123-32755	Front Range #11-17-8	FR	<input checked="" type="checkbox"/>
420931	WELL	XX	12/17/2012	LO	123-32757	Front Range 11-17-23	XX	<input type="checkbox"/>
420936	WELL	PR	09/05/2012	LO	123-32762	Front Range #11-17-7	FR	<input checked="" type="checkbox"/>
420937	WELL	PR	11/09/2011	OW	123-32763	Front Range #11-17-10	FR	<input checked="" type="checkbox"/>

Equipment:**Location Inventory**

Special Purpose Pits: _____	Drilling Pits: <u>1</u>	Wells: <u>10</u>	Production Pits: _____
Condensate Tanks: <u>2</u>	Water Tanks: <u>2</u>	Separators: <u>4</u>	Electric Motors: _____
Gas or Diesel Mortors: _____	Cavity Pumps: _____	LACT Unit: _____	Pump Jacks: _____
Electric Generators: _____	Gas Pipeline: <u>10</u>	Oil Pipeline: <u>10</u>	Water Pipeline: _____
Gas Compressors: _____	VOC Combustor: <u>1</u>	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			
WELLHEAD	Satisfactory			
CONTAINERS	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
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☐ Multiple Spills and Releases?**Equipment:**

Type	#	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
Bird Protectors	5	Satisfactory			
Gas Meter Run	4	Satisfactory			
Plunger Lift	4	Satisfactory			
Emission Control Device	1	Satisfactory			
Horizontal Heated Separator	4	Satisfactory			

Facilities:☐ New Tank

Tank ID: _____

Contents	#	Capacity	Type	SE GPS
PRODUCED WATER	1	100 BBLS	FIBERGLASS AST	,

S/U/V: Satisfactory Comment: _____

Corrective Action: _____ Corrective Date: _____

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 _____

Comment _____

Facilities:		<input type="checkbox"/> New Tank		Tank ID: _____	
Contents	#	Capacity	Type	SE GPS	
CRUDE OIL	2	200 BBLS	STEEL AST	,	
S/U/V:	Satisfactory		Comment: _____		
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	6	300 BBLS	STEEL AST	40.184900, -104.482120	
S/U/V:	Satisfactory		Comment: _____		
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					
Venting:					
Yes/No		Comment			
NO					
Flaring:					
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date	
Ignitor/Combustor	Satisfactory				
Predrill					
Location ID: 420929					
Site Preparation:					
Lease Road Adeq.: _____		Pads: _____		Soil Stockpile: _____	

S/U/V: _____

Corrective Action: _____

Date: _____

CDP Num.: _____

Form 2A COAs:

Group	User	Comment	Date
OGLA	youngr	The wetland boundary north of the proposed location will be determined and marked by a qualified professional prior to construction of the well pad.	12/20/2010
OGLA	deranleaug	Location is on steep slopes; therefore the cut and fill slopes should be constructed in such a manner to manage site drainage and slope stability. The slopes should be stabilized immediately after the location has been constructed.	10/25/2010
OGLA	deranleaug	Location is in a sensitive area because of proximity to surface water and wetlands; therefore, either a lined drilling pit or closed loop system is required.	10/25/2010
OGLA	deranleaug	Operator must implement site-specific best management practices in accordance with good engineering practices, including, but not limited to, construction of a berm or diversion dike, site grading, or other comparable measures, sufficient to protect the surface water/wetlands located 165 feet north of the proposed oil and gas location from a release of drilling, completion, produced fluids, and chemical products.	10/25/2010
OGLA	youngr	Construction of the pad and the continuing operation of the facility will not encroach beyond the current boundary of the wetland area to the north of the location.	12/20/2010

S/U/V: _____ **Comment:** _____**CA:** _____**Date:** _____**Wildlife BMPs:**

BMP Type	Comment
Storm Water/Erosion Control	Please see attached conceptual pad plat with indicated storm water retention pond and rockfall for capture area.

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: 295716 Type: WELL API Number: 123-25792 Status: PR Insp. Status: FR

Producing Well

Comment: PR

Facility ID: 420925 Type: WELL API Number: 123-32751 Status: PR Insp. Status: FR

Producing Well

Comment: PR

Facility ID: 420928 Type: WELL API Number: 123-32754 Status: PR Insp. Status: FR

Producing Well

Comment: PR

Facility ID: 420929 Type: WELL API Number: 123-32755 Status: PR Insp. Status: FR

Producing Well

Comment: PR

Facility ID: 420936 Type: WELL API Number: 123-32762 Status: PR Insp. Status: FR

Producing Well

Comment: PR

Facility ID: 420937 Type: WELL API Number: 123-32763 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: DRY LAND

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? _____

RESTORATION AND REVEGETATIONCropland

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 _____

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 _____

Inspector Name: MONTOYA, JOHN

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:	<div></div>		
Corrective Action:	<div></div>	Date _____	
Overall Final Reclamation		Well Release on Active Location <input type="checkbox"/>	Multi-Well Location <input type="checkbox"/>

Storm Water:

Loc Erosion BMPs	BMP Maintenance	Lease Road Erosion BMPs	Lease BMP Maintenance	Chemical BMPs	Chemical BMP Maintenance	Comment

S/U/V: _____	Corrective Date: _____
Comment:	<div></div>
CA:	<div></div>

Pits: ☐ NO SURFACE INDICATION OF PIT