

**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:

03/20/2014

Document Number:

674100508

Overall Inspection:

**Unsatisfactory****FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection
	243644	336642	Rickard, Jeffrey	<input type="checkbox"/> 2A Doc Num: _____

**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
Teter, Roy		rteter@kpk.com	All Inspections
Kuhn, Denny		dkuhn@kpk.com	All Inspections
Lara-Mesa, Susana		SLaraMesa@kpk.com	All Inspections

**Compliance Summary:**QtrQtr: SWNE Sec: 7 Twp: 4N Range: 66W**Inspector Comment:****Related Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status	
243644	WELL	PR	11/18/1983	OW	123-11436	KAMMERZELL 1-9	PR	<input checked="" type="checkbox"/>
289282	WELL	XX	05/02/2012	LO	123-24788	KAMMERZELL #7-7-24	XX	<input type="checkbox"/>

**Equipment:****Location Inventory**

Special Purpose Pits: _____	Drilling Pits: <u>1</u>	Wells: <u>2</u>	Production Pits: _____
Condensate Tanks: <u>2</u>	Water Tanks: <u>1</u>	Separators: _____	Electric Motors: _____
Gas or Diesel Mortors: _____	Cavity Pumps: _____	LACT Unit: _____	Pump Jacks: _____
Electric Generators: _____	Gas Pipeline: <u>2</u>	Oil Pipeline: <u>2</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
BATTERY	Satisfactory			
TANK LABELS/PLACARDS	Satisfactory			
BATTERY	Satisfactory			

Inspector Name: Rickard, Jeffrey

Emergency Contact Number: (S/U/V) Satisfactory

Corrective Date: \_\_\_\_\_

Comment: \_\_\_\_\_

Corrective Action: \_\_\_\_\_

Spills:				
Type	Area	Volume	Corrective action	CA Date
Other	WELLHEAD		Wellhead laeking gas at master valve. Fix leak.	04/20/2014
Other	Separator		Seperator leaking gas at gage on seperator, see photo. Fix leak	04/20/2014

☐ Multiple Spills and Releases?

Equipment:					
Type	#	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
Gas Meter Run	1	Satisfactory			
Horizontal Heated Separator	1	Satisfactory			

Facilities: ☐ New Tank Tank ID: \_\_\_\_\_

Contents	#	Capacity	Type	SE GPS
PRODUCED WATER	1	<50 BBLS	BV CONCRETE	40.328960,-104.818320

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
Earth	Adequate	Walls Sufficent	Base Sufficient	Adequate

Corrective Action	_____	Corrective Date	_____
Comment	_____		

Inspector Name: Rickard, Jeffrey

<b>Facilities:</b>		<input type="checkbox"/> New Tank	Tank ID: _____	
Contents	#	Capacity	Type	SE GPS
CRUDE OIL	2	300 BBLS	STEEL AST	40.328960,-104.818320
S/U/V:	Unsatisfactory	Comment: Tanks are not painted an approved color.		
Corrective Action: Paint tanks.				Corrective Date: 05/20/2014
<u>Paint</u>				
Condition	Inadequate			
Other (Content) _____				
Other (Capacity) _____				
Other (Type) _____				
<u>Berms</u>				
Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Earth	Adequate	Walls Sufficient	Base Sufficient	Adequate
Corrective Action				Corrective Date
Comment				
<u>Venting:</u>				
Yes/No	Comment			
NO				
<u>Flaring:</u>				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date

**Predrill**

Location ID: 243644

**Site Preparation:**

Lease Road Adeq.: \_\_\_\_\_ Pads: \_\_\_\_\_ Soil Stockpile: \_\_\_\_\_

S/U/V: \_\_\_\_\_

Corrective Action: \_\_\_\_\_ Date: \_\_\_\_\_ CDP Num.: \_\_\_\_\_

**Form 2A COAs:**

Group	User	Comment	Date
Agency	young	Location is in a sensitive area because of shallow groundwater; therefore, either a lined drilling pit or closed loop system is required.	05/07/2010

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: 243644 Type: WELL API Number: 123-11436 Status: PR Insp. Status: PR

**Producing Well**

Comment: PR

**Environmental****Spills/Releases:**

Type of Spill: \_\_\_\_\_ Description: \_\_\_\_\_ Estimated Spill Volume: \_\_\_\_\_

Inspector Name: Rickard, Jeffrey

Comment: <input style="width:700px" type="text"/>			
Corrective Action: _____		Date: _____	
Reportable: _____	GPS: Lat _____	Long _____	
Proximity to Surface Water: _____		Depth to Ground Water: _____	
<b>Water Well:</b>			
		Lat _____	Long _____
DWR Receipt Num: _____	Owner Name: _____	GPS : _____	
<b>Field Parameters:</b>			
<input style="width:300px" type="text"/>			
Sample Location: <input style="width:400px" type="text"/>			
Emission Control Burner (ECB): _____			
Comment: _____			
Pilot: _____		Wildlife Protection Devices (fired vessels): _____	

**Reclamation - Storm Water - Pit**

<b>Interim Reclamation:</b>			
Date Interim Reclamation Started: _____		Date Interim Reclamation Completed: _____	
Land Use: IRRIGATED			
Comment: <input style="width:700px" type="text"/>			
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 REVEGETATION			
<u>Cropland</u>			
	Top soil replaced _____	Recontoured _____	Perennial forage re-established _____

Inspector Name: Rickard, Jeffrey

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: IRRIGATED \_\_\_\_\_

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 \_\_\_\_\_

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

S/U/V: Satisfactory \_\_\_\_\_ Corrective Date: \_\_\_\_\_

Comment: \_\_\_\_\_

CA: \_\_\_\_\_

Pits: ☐ NO SURFACE INDICATION OF PIT

**COGCC Comments**

Comment	User	Date
Tanks need to be painted. Leaks on wellhead and separator need to be fixed.	rickardj	03/20/2014

**Attached Documents**

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

Document Num	Description	URL
674100509	leaking gage on separator.	<a href="http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3303760">http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3303760</a>