

FORM INSP <small>Rev 05/11</small>	State of Colorado Oil and Gas Conservation Commission <small>1120 Lincoln Street, Suite 801, Denver, Colorado 80203 Phone: (303) 894-2100 Fax: (303) 894-2109</small>		DE	ET	OE	ES
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FIELD INSPECTION FORM

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection <input type="checkbox"/>
	204889	320775	Sherman, Susan	2A Doc Num: _____

Inspection Date:
03/24/2014

Document Number:
673701917

Overall Inspection:
Unsatisfactory

Operator Information:

OGCC Operator Number: _____

Name of Operator: K P KAUFFMAN COMPANY INC

Address: 1675 BROADWAY, STE 2800

City: 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
Gilbert, Ken	(303) 825-4822	kgilbert@kpk.com	
Lara-Mesa, Susana	(303) 825-4822	slaramesa@kpk.com	

Compliance Summary:

QtrQtr: SWSE Sec: 32 Twp: 4S Range: 63W

Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Unsatisfactory	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
01/27/2012	658500106	PR	PR	Satisfactory			No
12/15/2005	200082412	PR	PR	Unsatisfactory		Fail	No
08/19/1998	500134811	PR	PR			Fail	Yes

Inspector Comment:

Related Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status	
204889	WELL	PR	10/03/1990	OW	005-06974	SIERRA-MITCHELL #32-8	PR	<input checked="" type="checkbox"/>

Equipment: Location Inventory

Special Purpose Pits: _____	Drilling Pits: _____	Wells: <u>2</u>	Production Pits: _____
Condensate Tanks: <u>3</u>	Water Tanks: <u>1</u>	Separators: <u>1</u>	Electric Motors: _____
Gas or Diesel Mortors: _____	Cavity Pumps: _____	LACT Unit: _____	Pump Jacks: _____
Electric Generators: _____	Gas Pipeline: _____	Oil Pipeline: <u>2</u>	Water Pipeline: <u>2</u>
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
BATTERY	Satisfactory			

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TANK LABELS/PLACARDS	Unsatisfactory	Container at wellhead not labeled.	Install sign to comply with rule 210.	04/25/2014
WELLHEAD	Satisfactory			

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

Comment: _____

Corrective Action: _____

Good Housekeeping:				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
TRASH	Unsatisfactory	cigarettes	pick up/no smoking	04/01/2014
WEEDS	Unsatisfactory	W of well (see attached photos).	Maintain weeds.	05/01/2014

Spills:				
Type	Area	Volume	Corrective action	CA Date
Crude Oil	WELLHEAD	<= 5 bbls	Remove and remediate stained soil (see attached photo).	04/04/2014

Multiple Spills and Releases?

Fencing/:				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
PUMP JACK	Satisfactory	steel pipe		

Equipment:					
Type	#	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
Horizontal Heater Treater	1	Satisfactory	berms 39.65299, - 104.46041		
Ancillary equipment	2	Satisfactory	enardo valve on crude oil tank and vent on PW tank		
Veritcal Heater Treater	1	Satisfactory			
Gas Meter Run	1	Satisfactory	solar telemetry		
Bird Protectors	2	Satisfactory	on treaters		
Deadman # & Marked	4	Satisfactory			

Facilities:		<input type="checkbox"/> New Tank	Tank ID: _____	
Contents	#	Capacity	Type	SE GPS
PRODUCED WATER	1	OTHER	FIBERGLASS AST	,
S/U/V:	Comment:		Same berms as crude oil tanks.	
Corrective Action:			Corrective Date:	
<u>Paint</u>				
Condition				
Other (Content)	_____			
Other (Capacity)	50 _____			
Other (Type)	_____			
<u>Berms</u>				
Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Corrective Action			Corrective Date	
Comment				

Facilities:		<input type="checkbox"/> New Tank	Tank ID: _____	
Contents	#	Capacity	Type	SE GPS
CRUDE OIL	3	300 BBLS	STEEL AST	39.646530, -104.470430
S/U/V:	Comment:		AIRS 005-1493-002	
Corrective Action:			Corrective Date: 04/25/2014	
<u>Paint</u>				
Condition	Adequate			
Other (Content)	_____			
Other (Capacity)	_____			
Other (Type)	_____			
<u>Berms</u>				
Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Earth	Adequate	Walls Insufficient	Base Sufficient	Inadequate
Corrective Action			Corrective Date	
Maintain berms.			05/01/2014	
Comment				
Animal holes E side (see attached photo).				

Venting:		
Yes/No	Comment	

Flaring:				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date

Predrill

Location ID: 204889

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: 204889 Type: WELL API Number: 005-06974 Status: PR Insp. Status: PR

Producing Well

Comment: **Pr**
Jan 2014 last production data.

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: _____ Lat _____ Long _____
DWR Receipt Num: _____ Owner Name: _____ GPS : _____

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: IRRIGATED

Comment: wheat field

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? _____ CM _____ CA _____ CA Date _____
Guy line anchors removed? _____ CM _____ CA _____ CA Date _____
Guy line anchors marked? Pass CM _____ CA _____ CA Date _____

1003b. Area no longer in use? Fail Production areas stabilized ? Fail

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? Fail

Production areas have been stabilized? Fail 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 _____

Inspector Name: Sherman, Susan

1003 f. Weeds Noxious weeds? _____

Comment: _____

Overall Interim Reclamation Fail

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
Gravel	Pass			MHSP	Fail	
Compaction	Fail	Compaction	Pass	SR	Pass	

S/U/V: **Unsatisfactory** Corrective Date: **05/01/2014**

Comment: **Rills carrying sediment to field (see attached photo).
Container needs stormwater protection (see attached photo).**

CA: **Install stormwater BMPs to prevent location degradation.**

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
673701929	KPK SM 32-8 well	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3307582
673701930	KPK SM 32-8 well	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3307583
673701931	KPK SM 32-8 well	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3307584
673701932	KPK SM 32-8 well	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3307585
673701933	KPK SM 32-8 well	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3307586
673701934	KPK SM 32-8 Bat	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3307587
673701935	KPK SM 32-8 well	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3307588
673701936	KPK SM 32-8 Bat	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3307589

673701937	KPK SM 32-8 Bat	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3307590
673701938	KPK SM 32-8 Bat	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3307591