

**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 |
|----|----|----|----|

Inspection Date:

04/30/2014

Document Number:

668301417

Overall Inspection:

**ACTION REQUIRED****FIELD INSPECTION FORM**

|                     |               |               |                         |                          |             |
|---------------------|---------------|---------------|-------------------------|--------------------------|-------------|
| Location Identifier | Facility ID   | Loc ID        | Inspector Name:         | On-Site Inspection       | 2A Doc Num: |
|                     | <u>240143</u> | <u>317899</u> | <u>JOHNSON, RANDELL</u> | <input type="checkbox"/> |             |

**Operator Information:**OGCC Operator Number: 46290Name 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    |                 |
| Lara-Mesa, Susana | 303-825-4822 | slaramesa@kpk.com | All Inspections |
| Kuhn, Denny       |              | dkuhn@kpk.com     |                 |

**Compliance Summary:**QtrQtr: NENW Sec: 35 Twp: 2N Range: 68W

| Insp. Date | Doc Num   | Insp. Type | Insp Status | Satisfactory /Action Required | PA P/F/I | Pas/Fail (P/F) | Violation (Y/N) |
|------------|-----------|------------|-------------|-------------------------------|----------|----------------|-----------------|
| 09/07/2007 | 200124040 | PR         | PR          | <b>ACTION REQUIRED</b>        |          |                | Yes             |
| 04/12/2002 | 200025677 | PR         | PR          | SATISFACTOR Y                 |          | Pass           | No              |
| 11/17/1998 | 500161948 | PR         | PR          |                               |          | Pass           | No              |
| 02/06/1996 | 500161947 | PR         | PR          |                               |          | Fail           | Yes             |

**Inspector Comment:****Related Facilities:**

| Facility ID | Type | Status | Status Date | Well Class | API Num   | Facility Name   | Insp Status |                                     |
|-------------|------|--------|-------------|------------|-----------|-----------------|-------------|-------------------------------------|
| 240143      | WELL | PR     | 11/07/1974  | OW         | 123-07931 | LANSONS FARMS 4 | PR          | <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 Mortors: _____ | 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**

|                      |                              |         |                   |         |
|----------------------|------------------------------|---------|-------------------|---------|
| <b>Signs/Marker:</b> |                              |         |                   |         |
| Type                 | Satisfactory/Action Required | Comment | Corrective Action | CA Date |
| WELLHEAD             | SATISFACTORY                 |         |                   |         |

Emergency Contact Number (S/A/V): SATISFACTORY

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

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

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

|                |          |           |  |            |
|----------------|----------|-----------|--|------------|
| <b>Spills:</b> |          |           |  |            |
| Type           | Area     | Volume    | Corrective action  | CA Date    |
| PW/CO          | WELLHEAD | <= 5 bbls | Remove or remediate stained soil at wellhead/See attached photo on last page of document | 05/30/2014 |

☐ Multiple Spills and Releases?

|                  |                              |  |                   |         |
|------------------|------------------------------|--|-------------------|---------|
| <b>Fencing/:</b> |                              |  |                   |         |
| Type             | Satisfactory/Action Required | Comment  | Corrective Action | CA Date |
| PUMP JACK        | SATISFACTORY                 | Rod and wire mesh fencing                        |                   |         |
| OTHER            | SATISFACTORY                 | Pipe and rod fencing around electrical equipment |                   |         |

|                     |   |                              |   |   |            |
|---------------------|---|------------------------------|---|---|------------|
| <b>Equipment:</b>   |   |                              |   |   |            |
| Type                | # | Satisfactory/Action Required | Comment   | Corrective Action   | CA Date    |
|                     |   | ACTION REQUIRED              | Surface casing/bradenhead is not plumbed to the surface/See attached photo on last page of document | Plumb surface casing/bradenhead to the surface so as to allow access for inspection | 05/30/2014 |
| Pump Jack           | 1 |                              |   |   |            |
| Prime Mover         | 1 | SATISFACTORY                 |   |   |            |
| Ancillary equipment |   |                              | Electrical transformers, breaker panel and meter box  |   |            |

|                    |  |                                   |                     |   |                  |
|--------------------|--|-----------------------------------|---------------------|---|------------------|
| <b>Facilities:</b> |  | <input type="checkbox"/> New Tank |                     | Tank ID: _____  |                  |
| Contents           | #  | Capacity                          | Type                | SE GPS  |                  |
|                    |  |                                   | CENTRALIZED BATTERY | 40.101670,-104.966520   |                  |
| S/A/V:             |  |                                   | Comment:            | See related inspection document #668301380 for information concerning shared facilities and equipment |                  |
| Corrective Action: |  |                                   |                     |   | Corrective Date: |
| <b>Paint</b>       |  |                                   |                     |   |                  |
| Condition          |  |                                   |                     |   |                  |
| Other (Content)    |  |                                   |                     |   |                  |
| Other (Capacity)   |  |                                   |                     |   |                  |
| Other (Type)       |  |                                   |                     |   |                  |
| <b>Berms</b>       |  |                                   |                     |   |                  |
| Type               | Capacity   | Permeability (Wall)               | Permeability (Base) | Maintenance   |                  |
| Earth              | Inadequate   | Walls Insufficient                | Base Sufficient     | Inadequate  |                  |
| Corrective Action  | Repair battery berm  |                                   |                     | Corrective Date   | 05/29/2014       |
| Comment            | Damage to southwest corner of berm has rendered the secondary containment inadequate/See attached photo on last page of Inspection Document #668301380 |                                   |                     |   |                  |
| <b>Venting:</b>    |  |                                   |                     |   |                  |
| Yes/No             | Comment  |                                   |                     |   |                  |
| NO                 |  |                                   |                     |   |                  |
| <b>Flaring:</b>    |  |                                   |                     |   |                  |
| Type               | Satisfactory/Action Required   | Comment                           | Corrective Action   | CA Date   |                  |
|                    |  |                                   |                     |   |                  |

**Predrill**

Location ID: 240143

**Site Preparation:**

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

**S/A/V:** \_\_\_\_\_

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

**Form 2A COAs:****S/A/V:** \_\_\_\_\_ **Comment:** \_\_\_\_\_**CA:** \_\_\_\_\_ **Date:** \_\_\_\_\_**Wildlife BMPs:****S/A/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: 240143 Type: WELL API Number: 123-07931 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: \_\_\_\_\_

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? PassProduction 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? \_\_\_\_\_

Inspector Name: JOHNSON, RANDELL

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: \_\_\_\_\_

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    |
|------------------|-----------------|-------------------------|-----------------------|---------------|--------------------------|------------|
| Other            | Pass            | Other                   | Pass                  |               |                          | Vegetation |
| Gravel           | Pass            | Gravel                  | Pass                  |               |                          |            |
| Compaction       | Pass            | Compaction              | Pass                  |               |                          |            |

S/A/V: SATISFACTOR Y \_\_\_\_\_ 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   |
|--------------|--|---|
| 668301418    | K P Kauffman - Lansons Farms 4 (123-07931) | <a href="http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3334371">http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3334371</a> |