

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:
10/10/2014

Document Number:
674101514

Overall Inspection:
SATISFACTORY

FIELD INSPECTION FORM

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	<u>422777</u>	<u>422751</u>	<u>Rickard, Jeffrey</u>	<input type="checkbox"/>	

Operator Information:

OGCC Operator Number:	<u>47120</u>
Name of Operator:	<u>KERR MCGEE OIL & GAS ONSHORE LP</u>
Address:	<u>P O BOX 173779</u>
City:	<u>DENVER</u> State: <u>CO</u> Zip: <u>80217-</u>

- 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
		<u>kenny.trueax@anadarko.com</u>	
, General		<u>COGCCinspections@Anadarko.com</u>	All Inspections, send to Paul Avant as well

Compliance Summary:

QtrQtr: NESW Sec: 9 Twp: 4N Range: 67W

Inspector Comment:

Related Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status	
422753	WELL	PR	03/14/2012	OW	123-33370	JOHNSTOWN FARMS 35-9	PR	<input checked="" type="checkbox"/>
422757	WELL	PR	03/14/2012	OW	123-33372	JOHNSTOWN FARMS 13-9	PR	<input checked="" type="checkbox"/>
422761	WELL	PR	03/14/2012	OW	123-33375	JOHNSTOWN FARMS 25-9	PR	<input checked="" type="checkbox"/>
422762	WELL	PR	03/14/2012	OW	123-33376	JOHNSTOWN FARMS 33-9	PR	<input checked="" type="checkbox"/>
422764	WELL	PR	03/14/2012	OW	123-33377	JOHNSTOWN FARMS 19-9	PR	<input checked="" type="checkbox"/>
422771	WELL	PR	01/26/2012	OW	123-33379	JOHNSTOWN FARMS 11-9	PR	<input checked="" type="checkbox"/>
422773	WELL	PR	03/14/2012	OW	123-33381	JOHNSTOWN FARMS 12-9	PR	<input checked="" type="checkbox"/>
422776	WELL	PR	03/14/2012	OW	123-33382	JOHNSTOWN FARMS 23-9	PR	<input checked="" type="checkbox"/>
422777	WELL	PR	01/26/2012	OW	123-33383	JOHNSTOWN FARMS 22-9	PR	<input checked="" type="checkbox"/>
435367	TANK BATTERY	AC	12/09/2013	LO	-	Johnstown Farms Tank Battery 435367	AC	<input type="checkbox"/>

Equipment:

Location Inventory

Inspector Name: Rickard, Jeffrey

Special Purpose Pits: _____	Drilling Pits: _____	Wells: <u>9</u>	Production Pits: _____
Condensate Tanks: _____	Water Tanks: <u>1</u>	Separators: <u>9</u>	Electric Motors: _____
Gas or Diesel Mortors: _____	Cavity Pumps: _____	LACT Unit: _____	Pump Jacks: _____
Electric Generators: _____	Gas Pipeline: <u>1</u>	Oil Pipeline: _____	Water Pipeline: _____
Gas Compressors: _____	VOC Combustor: <u>1</u>	Oil Tanks: <u>9</u>	Dehydrator Units: _____
Multi-Well Pits: _____	Pigging Station: _____	Flare: <u>1</u>	Fuel Tanks: _____

Location

Emergency Contact Number (S/A/V): SATISFACTORY Corrective Date: _____

Comment: _____

Corrective Action: _____

Spills:				
Type	Area	Volume	Corrective action	CA Date
<input type="checkbox"/> Multiple Spills and Releases?				

Venting:	
Yes/No	Comment
NO	

Flaring:				
Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date

Predrill

Location ID: 422777

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:

BMP Type	Comment
Material Handling and Spill Prevention	A containment berm will be constructed between the tank battery and the stream to the west as shown on the attached location drawing.

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: 422753 Type: WELL API Number: 123-33370 Status: PR Insp. Status: PR

Producing Well

Comment: **PR**

BradenHead

Comment: **Braden head is exposed at surface.**

CA: _____

CA Date: _____

Facility ID: 422757 Type: WELL API Number: 123-33372 Status: PR Insp. Status: PR

Producing Well

Comment: PR

BradenHead

Comment: Braden head is exposed at surface.

CA:

CA Date:

Facility ID: 422761 Type: WELL API Number: 123-33375 Status: PR Insp. Status: PR

Producing Well

Comment: PR

BradenHead

Comment: Braden head is exposed at surface.

CA:

CA Date:

Facility ID: 422762 Type: WELL API Number: 123-33376 Status: PR Insp. Status: PR

Producing Well

Comment: PR

BradenHead

Comment: Braden head is exposed at surface.

CA:

CA Date:

Facility ID: 422764 Type: WELL API Number: 123-33377 Status: PR Insp. Status: PR

Producing Well

Comment: PR

BradenHead

Comment: Braden head is exposed at surface.

CA:

CA Date:

Facility ID: 422771 Type: WELL API Number: 123-33379 Status: PR Insp. Status: PR

Producing Well

Comment: PR

BradenHead

Comment: Braden head is exposed at surface.

CA:

CA Date:

Facility ID: 422773 Type: WELL API Number: 123-33381 Status: PR Insp. Status: PR

Producing Well

Comment: PR

BradenHead

Comment: Braden head is exposed at surface.

CA: []

CA Date:

Facility ID: 422776 Type: WELL API Number: 123-33382 Status: PR Insp. Status: PR

Producing Well

Comment: PR

BradenHead

Comment: Braden head is exposed at surface.

CA: []

CA Date:

Facility ID: 422777 Type: WELL API Number: 123-33383 Status: PR Insp. Status: PR

Producing Well

Comment: PR

BradenHead

Comment: Braden head is exposed at surface.

CA: []

CA Date:

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): Y

Comment: []

Pilot: ON Wildlife Protection Devices (fired vessels): YES

Reclamation - Storm Water - Pit

Interim Reclamation:

Date Interim Reclamation Started: Date Interim Reclamation Completed:

Land Use: IRRIGATED

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 REVEGETATION

Cropland

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: RESIDENTIAL

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: _____

Inspector Name: Rickard, Jeffrey

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					

S/A/V: SATISFACTOR Corrective Date: _____
Y _____

Comment: _____

CA: _____

Pits: NO SURFACE INDICATION OF PIT