

**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:
11/18/2014Document Number:
674101726Overall Inspection:
SATISFACTORY**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	413293	327855	Rickard, Jeffrey	<input type="checkbox"/>	

Operator Information:OGCC Operator Number: 47120Name of Operator: KERR MCGEE OIL & GAS ONSHORE LPAddress: P O BOX 173779City: DENVER State: CO Zip: 80217-

- ☐ 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
, General		COGCCinspections@Anadarko.com	All Inspections, send to Paul Avant as well
Avant, Paul		Paul.Avant@Anadarko.com	Anadarko Inspections

Compliance Summary:QtrQtr: SENW Sec: 35 Twp: 2N Range: 68W**Inspector Comment:****Related Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status	
247444	WELL	PR	05/16/2012	OW	123-15241	LANSONS FARM/NAV/4	PR	<input checked="" type="checkbox"/>
413289	WELL	PR	11/08/2012	OW	123-30644	NELSON 3-35	PR	<input checked="" type="checkbox"/>
413291	WELL	PR	05/17/2010	GW	123-30645	NELSON 6-35	PR	<input checked="" type="checkbox"/>
413292	WELL	PR	05/18/2010	OW	123-30646	NELSON 28-35	PR	<input checked="" type="checkbox"/>
413293	WELL	PR	07/24/2012	OW	123-30647	NELSON 22-35	PR	<input checked="" type="checkbox"/>
413294	WELL	PR	07/24/2012	OW	123-30648	NELSON 4-35	PR	<input checked="" type="checkbox"/>
413298	WELL	PR	07/24/2012	OW	123-30649	NELSON 5-35	PR	<input checked="" type="checkbox"/>
413299	WELL	PR	07/24/2012	OW	123-30650	NELSON 30-35	PR	<input checked="" type="checkbox"/>

Equipment:**Location Inventory**

Inspector Name: Rickard, Jeffrey

Special Purpose Pits: _____	Drilling Pits: <u>1</u>	Wells: <u>7</u>	Production Pits: _____
Condensate Tanks: _____	Water Tanks: <u>1</u>	Separators: <u>7</u>	Electric Motors: <u>77</u>
Gas or Diesel Mortors: <u>4</u>	Cavity Pumps: _____	LACT Unit: _____	Pump Jacks: _____
Electric Generators: <u>3</u>	Gas Pipeline: <u>1</u>	Oil Pipeline: _____	Water Pipeline: _____
Gas Compressors: <u>1</u>	VOC Combustor: <u>1</u>	Oil Tanks: <u>7</u>	Dehydrator Units: _____
Multi-Well Pits: _____	Pigging Station: _____	Flare: <u>1</u>	Fuel Tanks: <u>7</u>

Location

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

Corrective Date: _____

Comment: _____

Corrective Action: _____

Spills:

Type	Area	Volume	Corrective action	CA Date
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☐ Multiple Spills and Releases?

Equipment:

Type	#	Satisfactory/Action Required	Comment	Corrective Action	CA Date
Plunger Lift	8	SATISFACTORY			

Venting:

Yes/No	Comment

Flaring:

Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date

Predrill

Location ID: 413293

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: 247444 Type: WELL API Number: 123-15241 Status: PR Insp. Status: PR

Producing Well

Comment: PR

BradenHead

Comment: Braden head is exposed at surface.

CA: _____

CA Date: _____

Facility ID: 413289 Type: WELL API Number: 123-30644 Status: PR Insp. Status: PR

Producing WellComment: **PR****BradenHead**Comment: **Braden head is exposed at surface.**

CA:

CA Date:

Facility ID: 413291 Type: WELL API Number: 123-30645 Status: PR Insp. Status: PR**Producing Well**Comment: **PR****BradenHead**Comment: **Braden head is exposed at surface.**

CA:

CA Date:

Facility ID: 413292 Type: WELL API Number: 123-30646 Status: PR Insp. Status: PR**Producing Well**Comment: **PR****BradenHead**Comment: **Braden head is exposed at surface.**

CA:

CA Date:

Facility ID: 413293 Type: WELL API Number: 123-30647 Status: PR Insp. Status: PR**Producing Well**Comment: **PR****BradenHead**Comment: **Braden head is exposed at surface.**

CA:

CA Date:

Facility ID: 413294 Type: WELL API Number: 123-30648 Status: PR Insp. Status: PR**Producing Well**Comment: **PR****BradenHead**Comment: **Braden head is exposed at surface.**

CA:

CA Date:

Facility ID: 413298 Type: WELL API Number: 123-30649 Status: PR Insp. Status: PR**Producing Well**Comment: **PR**

Inspector Name: Rickard, Jeffrey

BradenHead

Comment: Braden head is exposed at surface.

CA:

CA Date:

Facility ID: 413299 Type: WELL API Number: 123-30650 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? 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

Inspector Name: Rickard, Jeffrey

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? Pass

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: COMMERCIAL, INDUSTRIAL, IRRIGATED, 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: _____

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					

Inspector Name: Rickard, Jeffrey

S/A/V: SATISFACTOR
Y

Corrective Date: _____

Comment:

CA:

Pits: ☒ NO SURFACE INDICATION OF PIT