

**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:
04/21/2015Document Number:
674002148Overall Inspection:
SATISFACTORY**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	430943	328201	Carlile, Craig	<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
, Inspections		COGCCinspections@Anadarko.com	All Inspections
Avant, Paul	(720) 929-6457	Paul.Avant@Anadarko.com	All Inspections
, Reddy		luke.reddy@anadarko.com	

Compliance Summary:QtrQtr: SWSW Sec: 14 Twp: 3N Range: 66W**Inspector Comment:****Related Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status	
247890	WELL	PR	09/28/2009	OW	123-15688	HSR-NELSON 13-14	PR	<input checked="" type="checkbox"/>
430941	WELL	PR	11/12/2014	OW	123-36339	FERGE 30N-14HZ	PR	<input checked="" type="checkbox"/>
430942	WELL	PR	11/12/2014	OW	123-36340	FERGE 3N-14HZ	PR	<input checked="" type="checkbox"/>
430943	WELL	PR	11/12/2014	OW	123-36341	FERGE 28N-14HZ	PR	<input checked="" type="checkbox"/>
430944	WELL	AL	12/17/2013	LO	123-36342	FERGE 29C-14HZ	AL	<input checked="" type="checkbox"/>
430945	WELL	PR	11/12/2014	OW	123-36343	FERGE 4C-14HZ	PR	<input checked="" type="checkbox"/>
430946	WELL	PR	11/12/2014	OW	123-36344	FERGE 29N-14HZ	PR	<input checked="" type="checkbox"/>

Equipment:Location Inventory

Inspector Name: Carlile, Craig

Special Purpose Pits: _____	Drilling Pits: <u>2</u>	Wells: <u>8</u>	Production Pits: _____
Condensate Tanks: _____	Water Tanks: _____	Separators: _____	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: _____	Oil Tanks: _____	Dehydrator Units: _____
Multi-Well Pits: _____	Pigging Station: _____	Flare: _____	Fuel Tanks: _____

Location

Signs/Marker:

Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
WELLHEAD	SATISFACTORY			

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

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	5	SATISFACTORY			

Venting:

Yes/No	Comment

Flaring:

Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date

Predrill

Location ID: 430943

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: 247890 Type: WELL API Number: 123-15688 Status: PR Insp. Status: PR

Producing Well

Comment: PR

BradenHead

Comment: plumbed to surface.

CA: _____

CA Date: _____

Facility ID: 430941 Type: WELL API Number: 123-36339 Status: PR Insp. Status: PR

Producing WellComment: **PR****BradenHead**Comment: **plumbed to surface.**

CA:

CA Date:

Facility ID: 430942 Type: WELL API Number: 123-36340 Status: PR Insp. Status: PR**Producing Well**Comment: **PR****BradenHead**Comment: **plumbed to surface.**

CA:

CA Date:

Facility ID: 430943 Type: WELL API Number: 123-36341 Status: PR Insp. Status: PR**Producing Well**Comment: **PR****BradenHead**Comment: **plumbed to surface.**

CA:

CA Date:

Facility ID: 430944 Type: WELL API Number: 123-36342 Status: AL Insp. Status: ALFacility ID: 430945 Type: WELL API Number: 123-36343 Status: PR Insp. Status: PR**Producing Well**Comment: **PR****BradenHead**Comment: **plumbed to surface.**

CA:

CA Date:

Facility ID: 430946 Type: WELL API Number: 123-36344 Status: PR Insp. Status: PR**Producing Well**Comment: **PR****BradenHead**Comment: **plumbed to surface.**

CA:

CA Date:

Environmental**Spills/Releases:**

Type of Spill: _____ Description: _____ Estimated Spill Volume: _____

Inspector Name: Carlile, Craig

Comment: <input style="width: 700px;" type="text"/>			
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:			
<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

Interim Reclamation:			
Date Interim Reclamation Started: _____		Date Interim Reclamation Completed: _____	
Land Use: DRY LAND			
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: Carlile, Craig

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: DRY LAND _____

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					

S/A/V: SATISFACTOR
Y

Corrective Date: _____

Comment: _____

CA: _____

Pits: ☐ NO SURFACE INDICATION OF PIT

COGCC Comments

Comment	User	Date
Follow up inspection. Previously cited signage issue has been addressed.	carlilec	04/21/2015