

**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

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Inspection Date:

08/11/2015

Document Number:

680700307

Overall Inspection:

SATISFACTORY**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	422753	422751	Peterson, Tom	<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
Reddy, Luke		luke.reddy@anadarko.com	All inspections
Avant, Paul	(720) 929-6457	paul.avant@anadarko.com	All inspections
,		cogccinspections@anadarko.com	All inspections

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

Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Action Required	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
08/06/2015	680700288	PR	PR	ACTION REQUIRED			No
11/14/2013	668401862	PR	FR	SATISFACTORY	I		No
11/07/2013	673800157	PR	FR	SATISFACTORY			No

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"/>

Inspector Name: Peterson, Tom

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

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 Motors: _____	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**Signs/Marker:**

Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
BATTERY	SATISFACTORY			
WELLHEAD	SATISFACTORY	x 9		
TANK LABELS/PLACARDS	SATISFACTORY			

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

Corrective Date: _____

Comment: _____

Corrective Action: _____

Good Housekeeping:

Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
OTHER	SATISFACTORY	Stained soil noted in prior inspection document #680700279 has been corrected.		

Spills:

Type	Area	Volume	Corrective action	CA Date
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☐ Multiple Spills and Releases?**Fencing/:**

Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
TANK BATTERY	SATISFACTORY	Wire topped chain link		
SEPARATOR	SATISFACTORY	Wire topped chain link		
WELLHEAD	SATISFACTORY	Wire topped chain link		
IGNITOR/COMBUST OR	SATISFACTORY	Wire topped chain link x 2		

Equipment:					
Type	#	Satisfactory/Action Required	Comment	Corrective Action	CA Date
Ancillary equipment	1	SATISFACTORY	Automation array		
Plunger Lift	9	SATISFACTORY			
Emission Control Device	2	SATISFACTORY	N40.32460 W-104.90144		
Gas Meter Run	6	SATISFACTORY	Master meter and 5 producer check meters.		
Pig Station	1	SATISFACTORY			
VRU	2	SATISFACTORY	N40.32477 W-104.90125		
Ancillary equipment	1	SATISFACTORY	ECD scrubber at tanks		
Horizontal Heated Separator	3	SATISFACTORY	N40.32457 W-104.90126		
Bird Protectors	5	SATISFACTORY			

Facilities:		<input type="checkbox"/> New Tank	Tank ID: _____	
Contents	#	Capacity	Type	SE GPS
PRODUCED WATER	1	OTHER	PBV FIBERGLASS	40.324150,-104.901360
S/A/V:	SATISFACTORY		Comment: 210 bbls	
Corrective Action:				Corrective Date:

Paint

Condition	Adequate
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Other (Content) _____

Other (Capacity) _____

Other (Type) _____

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Metal	Adequate	Walls Sufficient	Base Sufficient	Adequate

Corrective Action		Corrective Date	
Comment			

Facilities:		<input type="checkbox"/> New Tank	Tank ID: _____	
Contents	#	Capacity	Type	SE GPS
CRUDE OIL	6	OTHER	STEEL AST	40.324150,-104.901360
S/A/V:	SATISFACTORY		Comment: 315 bbls	
Corrective Action:				Corrective Date:

Paint

Condition	Adequate
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Other (Content) _____

Other (Capacity) _____

Other (Type) _____

Berms

Inspector Name: Peterson, Tom

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance	
Metal	Adequate	Walls Sufficient	Base Sufficient	Adequate	
Corrective Action					Corrective Date
Comment					

Venting:		
Yes/No	Comment	
NO		

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

Predrill

Location ID: 422753

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: Bradenhead is exposed at surface.

CA: _____

CA Date: _____

Inspector Name: Peterson, Tom

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

Producing Well

Comment: PR

BradenHead

Comment: Bradenhead 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: Bradenhead 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: Bradenhead 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: Bradenhead 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: Bradenhead 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

Inspector Name: Peterson, Tom

BradenHead

Comment: Bradenhead 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: Bradenhead 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: Bradenhead 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:

Inspector Name: Peterson, Tom

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? _____ 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: Peterson, Tom

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
Berms	Pass	Check Dams	Pass			
Gravel	Pass	Gravel	Pass			

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

Comment: _____

CA: _____

Pits: ☒ NO SURFACE INDICATION OF PIT