

**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:
09/01/2015Document Number:
671104923Overall Inspection:
SATISFACTORY**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	442958	442961	MONTOYA, JOHN	<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
Arthur, Denise		denise.arthur@state.co.us	
REDDY, LUKE		Luke.Reddy@anadarko.com	ALL INSPECTIONS
,		COGCCinspections@anadarko.com	All Inspections
Avant, Paul	720-929-6475	Paul.Avant@anadarko.com	regulatory

Compliance Summary:QtrQtr: SWNE Sec: 8 Twp: 2N Range: 65W**Inspector Comment:****Related Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status	
442954	WELL	XX	08/23/2015		123-42068	SUNFLOWER 40C-17HZ	ND	<input checked="" type="checkbox"/>
442955	WELL	XX	08/23/2015		123-42069	SUNFLOWER 7N-17HZ	ND	<input checked="" type="checkbox"/>
442956	WELL	XX	08/23/2015		123-42070	SUNFLOWER 8N-17HZ	ND	<input checked="" type="checkbox"/>
442957	WELL	XX	08/23/2015		123-42071	SUNFLOWER 7C-17HZ	ND	<input checked="" type="checkbox"/>
442958	WELL	XX	08/23/2015		123-42072	SUNFLOWER 25G-17HZ	ND	<input checked="" type="checkbox"/>
442959	WELL	XX	08/23/2015		123-42073	SUNFLOWER 24N-17HZ	ND	<input checked="" type="checkbox"/>
442960	WELL	XX	08/23/2015		123-42074	SUNFLOWER 40N-17HZ	ND	<input checked="" type="checkbox"/>

Equipment:**Location Inventory**

Inspector Name: MONTOYA, JOHN

Special Purpose Pits: _____	Drilling Pits: _____	Wells: <u>7</u>	Production Pits: _____
Condensate Tanks: _____	Water Tanks: _____	Separators: _____	Electric Motors: _____
Gas or Diesel Mortors: _____	Cavity Pumps: _____	LACT Unit: _____	Pump Jacks: <u>7</u>
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

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?

Venting:

Yes/No	Comment
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Flaring:

Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
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Predrill

Location ID: 442958

Site Preparation:

Lease Road Adeq.: SATISFACTORY Pads: SATISFACTORY Soil Stockpile: SATISFACTORY

S/A/V: SATISFACT

Corrective Action: _____ Date: _____ CDP Num.: _____

Form 2A COAs:

Group	User	Comment	Date
OGLA	treitzr	Operator shall provide notice to COGCC 48 hours prior to commencing construction of this Oil and Gas Location via Form 42 per Rule 316C.c.	08/17/2015

S/A/V: SATISFACTORY Comment: _____

CA: _____ Date: _____

Wildlife BMPs:

BMP Type	Comment
Planning	The nearest building unit is located 1,115' away from this oil and gas location, therefore it is not within a Designated Setback Location and is exempt from 604.c.

S/A/V: SATISFACTORY Comment: _____

CA: _____ Date: _____

Stormwater:

Erosion BMPs	Present	Other BMPs	Present
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Inspector Name: MONTOYA, JOHN

DITCHES	Yes	Self Inspection	Yes`
S/A/V: SATISFACTORY			
Corrective Action: _____		Date: _____	
Comments: Erosion BMPs: _____			
Other BMPs: _____			
Comment: wells have not been drilled still working on location			
Staking:			
On Site Inspection (305):			
<u>Surface Owner Contact Information:</u>			
Name: _____		Address: _____	
Phone Number: _____		Cell Phone: _____	
<u>Operator Rep. Contact Information:</u>			
Landman Name: _____		Phone Number: _____	
Date Onsite Request Received: _____		Date of Rule 306 Consultation: _____	
Request LGD Attendance: _____			
<u>LGD Contact Information:</u>			
Name: _____		Phone Number: _____	
		Agreed to Attend: _____	
<u>Summary of Landowner Issues:</u>			
<u>Summary of Operator Response to Landowner Issues:</u>			
<u>Onsite Inspection Memorandum Summarizing Discussions at Inspection as Attachment:</u>			

Facility

Facility ID: 442954	Type: WELL	API Number: 123-42068	Status: XX	Insp. Status: ND
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Well Drilling

Rig:	Rig Name: _____	Pusher/Rig Manager: _____
	Permit Posted: _____	Access Sign: _____
Well Control Equipment:		
Pipe Ram: _____	Blind Ram: _____	Hydril Type: _____
Pressure Test BOP: _____	Test Pressure PSI: _____	Safety Plan: _____
Drill Fluids Management:		
Lined Pit: _____	Unlined Pit: _____	Closed Loop: _____
Multi-Well: _____	Disposal Location: _____	Semi-Closed Loop: _____
Comment:		
not drilled		

Facility ID: 442955	Type: WELL	API Number: 123-42069	Status: XX	Insp. Status: ND
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Well Drilling

Rig:	Rig Name: _____	Pusher/Rig Manager: _____
	Permit Posted: _____	Access Sign: _____

Well Control Equipment:

Pipe Ram: _____ Blind Ram: _____ Hydril Type: _____
 Pressure Test BOP: _____ Test Pressure PSI: _____ Safety Plan: _____

Drill Fluids Management:

Lined Pit: _____ Unlined Pit: _____ Closed Loop: _____ Semi-Closed Loop: _____
 Multi-Well: _____ Disposal Location: _____

Comment:

not drilled

Facility ID: 442956 Type: WELL API Number: 123-42070 Status: XX Insp. Status: ND

Well Drilling

Rig: Rig Name: _____ Pusher/Rig Manager: _____
 Permit Posted: _____ Access Sign: _____

Well Control Equipment:

Pipe Ram: _____ Blind Ram: _____ Hydril Type: _____
 Pressure Test BOP: _____ Test Pressure PSI: _____ Safety Plan: _____

Drill Fluids Management:

Lined Pit: _____ Unlined Pit: _____ Closed Loop: _____ Semi-Closed Loop: _____
 Multi-Well: _____ Disposal Location: _____

Comment:

not drilled

Facility ID: 442957 Type: WELL API Number: 123-42071 Status: XX Insp. Status: ND

Well Drilling

Rig: Rig Name: _____ Pusher/Rig Manager: _____
 Permit Posted: _____ Access Sign: _____

Well Control Equipment:

Pipe Ram: _____ Blind Ram: _____ Hydril Type: _____
 Pressure Test BOP: _____ Test Pressure PSI: _____ Safety Plan: _____

Drill Fluids Management:

Lined Pit: _____ Unlined Pit: _____ Closed Loop: _____ Semi-Closed Loop: _____
 Multi-Well: _____ Disposal Location: _____

Comment:

not drilled

Facility ID: 442958 Type: WELL API Number: 123-42072 Status: XX Insp. Status: ND

Well Drilling

Rig: Rig Name: _____ Pusher/Rig Manager: _____
 Permit Posted: _____ Access Sign: _____

Well Control Equipment:

Pipe Ram: _____ Blind Ram: _____ Hydril Type: _____
 Pressure Test BOP: _____ Test Pressure PSI: _____ Safety Plan: _____

**Drill Fluids
Management:**

Lined Pit: _____ Unlined Pit: _____ Closed Loop: _____ Semi-Closed Loop: _____
 Multi-Well: _____ Disposal Location: _____

Comment:

not drilled

Facility ID: 442959 Type: WELL API Number: 123-42073 Status: XX Insp. Status: ND

Well Drilling

Rig: Rig Name: _____ Pusher/Rig Manager: _____
 Permit Posted: _____ Access Sign: _____

Well Control Equipment:

Pipe Ram: _____ Blind Ram: _____ Hydril Type: _____
 Pressure Test BOP: _____ Test Pressure PSI: _____ Safety Plan: _____

**Drill Fluids
Management:**

Lined Pit: _____ Unlined Pit: _____ Closed Loop: _____ Semi-Closed Loop: _____
 Multi-Well: _____ Disposal Location: _____

Comment:

not drilled

Facility ID: 442960 Type: WELL API Number: 123-42074 Status: XX Insp. Status: ND

Well Drilling

Rig: Rig Name: _____ Pusher/Rig Manager: _____
 Permit Posted: _____ Access Sign: _____

Well Control Equipment:

Pipe Ram: _____ Blind Ram: _____ Hydril Type: _____
 Pressure Test BOP: _____ Test Pressure PSI: _____ Safety Plan: _____

**Drill Fluids
Management:**

Lined Pit: _____ Unlined Pit: _____ Closed Loop: _____ Semi-Closed Loop: _____
 Multi-Well: _____ Disposal Location: _____

Comment:

not drilled

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: DRY LAND

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:

Inspector Name: MONTOYA, JOHN

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	Gravel	Pass			

S/A/V: SATISFACTOR

Corrective Date: _____

Y

Comment: _____

CA: _____

Pits: ☒ NO SURFACE INDICATION OF PIT

COGCC Comments

Comment	User	Date
seven wells to be drilled on this pad	montoyaj	09/01/2015

Attached Documents

You can go to COGCC Images (<https://cogcc.state.co.us/weblink/>) and search by document number:

Document Num	Description	URL
671104924	location stake	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3674691
671104925	dirt storage pile	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3674692
671104926	ditch and berm west side of location	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3674693
671104927	ditch and berm east side of location	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3674694