

**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

Inspection Date:

09/09/2016

Document Number:

681901404

Overall Inspection:

SATISFACTORY**FIELD INSPECTION FORM**

|                     |             |        |                 |                          |             |
|---------------------|-------------|--------|-----------------|--------------------------|-------------|
| Location Identifier | Facility ID | Loc ID | Inspector Name: | On-Site Inspection       | 2A Doc Num: |
|                     | 248356      | 328573 | HELGELAND, GARY | <input type="checkbox"/> |             |

**Operator Information:**OGCC Operator Number: 46290Name of Operator: K P KAUFFMAN COMPANY INCAddress: 1675 BROADWAY, STE 2800City: DENVER State: CO Zip: 80202

- ☐ 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        |
|-------------------|--------------|---------------|----------------|
| LARA-MESA, SUSANA | 303-825-4822 | cogcc@kpk.com | VP OF ENGINEER |

**Compliance Summary:**QtrQtr: NENW Sec: 8 Twp: 1N Range: 67W

| Insp. Date | Doc Num   | Insp. Type | Insp Status | Satisfactory /Action Required | PA P/F/I   | Pas/Fail (P/F) | Violation (Y/N) |
|------------|-----------|------------|-------------|-------------------------------|------------|----------------|-----------------|
| 08/07/2015 | 668703311 | PR         | PR          | SATISFACTORY                  | In Process |                | No              |
| 03/23/2011 | 200305033 | PR         | PR          | ACTION REQUIRED               |            |                | Yes             |
| 02/24/2004 | 200050306 | PR         | PR          | SATISFACTORY                  |            | Pass           | No              |
| 10/04/1999 | 500173244 | PR         | PR          |                               |            |                |                 |
| 01/12/1996 | 500173243 | PR         | PR          |                               |            | Fail           | Yes             |

**Inspector Comment:****Related Facilities:**

| Facility ID | Type | Status | Status Date | Well Class | API Num   | Facility Name            | Insp Status |                                     |
|-------------|------|--------|-------------|------------|-----------|--------------------------|-------------|-------------------------------------|
| 248356      | WELL | PR     | 03/20/1995  | GW         | 123-16154 | ROCKY MOUNTAIN FUEL 21-8 | PR          | <input checked="" type="checkbox"/> |

**Equipment:**Location Inventory

|                              |                        |                     |                         |
|------------------------------|------------------------|---------------------|-------------------------|
| Special Purpose Pits: _____  | Drilling Pits: _____   | Wells: _____        | Production Pits: _____  |
| Condensate Tanks: _____      | Water Tanks: _____     | Separators: _____   | Electric Motors: _____  |
| Gas or Diesel Mortors: _____ | Cavity Pumps: _____    | LACT Unit: _____    | Pump Jacks: _____       |
| 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**

| <b>Signs/Marker:</b> |                              |         |                                       |         |
|----------------------|------------------------------|---------|---------------------------------------|---------|
| Type                 | Satisfactory/Action Required | Comment | Corrective Action                     | CA Date |
| WELLHEAD             | SATISFACTORY                 |         | Install sign to comply with rule 210. |         |

Emergency Contact Number (S/AR): SATISFACTORY

Corrective Date: \_\_\_\_\_

Comment: \_\_\_\_\_

Corrective Action: \_\_\_\_\_

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

| <b>Fencing:</b> |                              |            |                   |         |
|-----------------|------------------------------|------------|-------------------|---------|
| Type            | Satisfactory/Action Required | Comment    | Corrective Action | CA Date |
| PUMP JACK       | SATISFACTORY                 | Angle iron |                   |         |

|                   |     |                               |              |       |
|-------------------|-----|-------------------------------|--------------|-------|
| <b>Equipment:</b> |     |                               |              |       |
| Type: Pump Jack   | # 1 | Satisfactory/Action Required: | SATISFACTORY |       |
| Comment           |     |                               |              |       |
| Corrective Action |     |                               |              | Date: |

| <b>Tanks and Berms:</b>           |                         |                |      |                  |
|-----------------------------------|-------------------------|----------------|------|------------------|
| <input type="checkbox"/> New Tank |                         | Tank ID: _____ |      |                  |
| Contents                          | #                       | Capacity       | Type | SE GPS           |
|                                   |                         |                |      |                  |
| S/AR                              | Comment: REMOTE BATTERY |                |      |                  |
| Corrective Action:                |                         |                |      | Corrective Date: |

| <b>Paint</b>     |  |  |  |  |
|------------------|--|--|--|--|
| Condition        |  |  |  |  |
| Other (Content)  |  |  |  |  |
| Other (Capacity) |  |  |  |  |
| Other (Type)     |  |  |  |  |

| <b>Berms</b>      |          |                     |                     |                 |
|-------------------|----------|---------------------|---------------------|-----------------|
| Type              | Capacity | Permeability (Wall) | Permeability (Base) | Maintenance     |
|                   |          |                     |                     |                 |
| Corrective Action |          |                     |                     | Corrective Date |
| Comment           |          |                     |                     |                 |

| <b>Venting:</b> |    |  |  |  |
|-----------------|----|--|--|--|
| Yes/No          | NO |  |  |  |
| Comment         |    |  |  |  |

| Flaring: |  |                              |  |
|----------|--|------------------------------|--|
| Type     |  | Satisfactory/Action Required |  |
| Comment: |  |                              |  |
|          |  |                              |  |

Corrective Action:

Correct Action  
Date:**Predrill**

Location ID: 248356

Lease Road Adeq.: \_\_\_\_\_

Pads: \_\_\_\_\_

Soil Stockpile: \_\_\_\_\_

S/AR: \_\_\_\_\_

Corrective Action: \_\_\_\_\_

Date: \_\_\_\_\_

CDP Num.: \_\_\_\_\_

**Form 2A COAs:**

S/AR: \_\_\_\_\_ Comment: \_\_\_\_\_

CA: \_\_\_\_\_ Date: \_\_\_\_\_

**Wildlife BMPs:**

S/AR: \_\_\_\_\_ Comment: \_\_\_\_\_

CA: \_\_\_\_\_ Date: \_\_\_\_\_

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: 248356 Type: WELL API Number: 123-16154 Status: PR Insp. Status: PR

**Producing Well**

Comment: PR

**BradenHead**

Comment: Bradenhead is plumed to surface.

CA: \_\_\_\_\_

CA Date: \_\_\_\_\_

**Environmental****Spills/Releases:**

Inspector Name: HELGELAND, GARY

|                                   |                              |                               |
|-----------------------------------|------------------------------|-------------------------------|
| Type of Spill: _____              | Description: _____           | Estimated Spill Volume: _____ |
| Comment: _____                    |                              |                               |
| Corrective Action: _____          |                              | Date: _____                   |
| Reportable: _____                 | GPS: Lat _____               | Long _____                    |
| Proximity to Surface Water: _____ | Depth to Ground Water: _____ |                               |

|                        |                   |             |            |
|------------------------|-------------------|-------------|------------|
| <b>Water Well:</b>     |                   | Lat _____   | Long _____ |
| DWR Receipt Num: _____ | Owner Name: _____ | GPS : _____ | _____      |

**Field Parameters:**

Sample Location: \_\_\_\_\_

|   |
|---|
| Emission Control Burner (ECB): _____                            |
| Comment: _____  |
| Pilot: _____ Wildlife Protection Devices (fired vessels): _____ |

**Reclamation - Storm Water - Pit**

|   |   |
|---|---|
| <b>Interim Reclamation:</b>             |   |
| Date Interim Reclamation Started: _____ | Date Interim Reclamation Completed: _____ |
| Land Use: _____                         |   |
| Comment: _____                          |   |

|   |               |
|---|---------------|
| 1003a. Waste and Debris removed? <u>Pass</u>                |               |
| CM _____  |               |
| CA _____  | CA Date _____ |
| Unused or unneeded equipment onsite? <u>Pass</u>            |               |
| CM _____  |               |
| CA _____  | CA Date _____ |
| Pit, cellars, rat holes and other bores closed? <u>Pass</u> |               |
| 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

Inspector Name: HELGELAND, GARY

Top soil replaced Pass

Recontoured Pass

Perennial forage re-established In

Non-Cropland

Top soil replaced \_\_\_\_\_

Recontoured \_\_\_\_\_

80% Revegetation \_\_\_\_\_

1003 f. Weeds Noxious weeds? \_\_\_\_\_

Comment: \_\_\_\_\_

Overall Interim Reclamation In Process

**Final Reclamation/ Abandoned Location:**

Date Final Reclamation Started: \_\_\_\_\_

Date Final Reclamation Completed: \_\_\_\_\_

Final Land Use: \_\_\_\_\_

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: SATISFACTORY Corrective Date: \_\_\_\_\_

Comment: \_\_\_\_\_

CA: \_\_\_\_\_

**Pits:** ☒ NO SURFACE INDICATION OF PIT

**Attached Documents**

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

| Document Num | Description         | URL   |
|--------------|---------------------|---|
| 681901404    | INSPECTION APPROVED | <a href="http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3947977">http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3947977</a> |