

**FORM  
INSP**Rev  
X/15**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:

10/27/2016

Submitted Date:

10/28/2016

Document Number:

685301660**FIELD INSPECTION FORM**
 Loc ID 313584 Inspector Name: St John, William (Cal) On-Site Inspection ☐ 2A Doc Num:                     
**Operator Information:**OGCC Operator Number: 46685Name of Operator: KINDER MORGAN CO2 CO LPAddress: 1001 LOUISIANA ST SUITE 1000City: HOUSTON State: TX Zip: 77002**Status Summary:**

- ☐ THIS IS A FOLLOW UP INSPECTION
- ☐ FOLLOW UP INSPECTION REQUIRED
- ☒ NO FOLLOW UP INSPECTION REQUIRED

**Findings:**6 Number of Comments0 Number of Corrective Actions☐ Corrective Action Response Requested**Contact Information:**

Contact Name	Phone	Email	Comment
Labowskie, Steve		steve.labowskie@state.co.us	COGCC
Conway, Jamie		James_Conway@kindermorgan.com	All inspections
Swift, Barry	970-882-5545	barry_swift@kindermorgan.com	SW Inspection Reports
Millican, Chris		chris_millican@kindermorgan.com	

**Inspected Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
266547	WELL	PR	05/06/2004	GW	083-06601	HE 5	PR

**General Comment:**

**Location**

<b>Lease Road:</b>			
Type	Access		
comment:			
Corrective ActionL		Date:	

Overall Good: ☐

<b>Signs/Marker:</b>			
Type	WELLHEAD		
Comment:			
Corrective Action:		Date:	

Emergency Contact Number:

Comment:

Corrective Action:  Date:

Overall Good: ☐

<b>Spills:</b>					
Type	Area	Volume			

In Containment: No

Comment: ☐ Multiple Spills and Releases?

<b>Fencing/:</b>			
Type	LOCATION		
Comment:	Post and Wire.		
Corrective Action:		Date:	

<b>Equipment:</b>			corrective date
Type: Flow Line	# 1		
Comment:			
Corrective Action:		Date:	
Type: Deadman # & Marked	# 4		
Comment:			
Corrective Action:		Date:	
Type: Ancillary equipment	# 1		
Comment:	Wellhead		
Corrective Action:		Date:	

<b>Venting:</b>			
Yes/No	NO		
Comment:			
Corrective Action:		Date:	

<b>Flaring:</b>		
Type		

Comment:			
Corrective Action:		Date:	

Inspected Facilities									
Facility ID:	266547	Type:	WELL	API Number:	083-06601	Status:	PR	Insp. Status:	PR
Producing Well									
Comment:		PR							
Corrective Action:								Date:	

Reclamation - Storm Water - Pit

Storm Water:

Loc Erosion BMPs	BMP Maintenance	Lease Road Erosion BMPs	Lease BMP Maintenance	Chemical BMPs	Chemical BMP Maintenance	Comment
Compaction	Pass	Compaction	Pass			
Gravel	Pass	Gravel	Pass			

Comment:

Corrective Action:

Date:

Pits: ☒ NO SURFACE INDICATION OF PIT