

**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:
12/05/2016
Submitted Date:
12/05/2016
Document Number:
681901831

FIELD INSPECTION FORM

Loc ID 318508 Inspector Name: HELGELAND, GARY On-Site Inspection 2A Doc Num: _____

Status Summary:

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

Operator Information:

OGCC Operator Number: 47120
Name of Operator: KERR MCGEE OIL & GAS ONSHORE LP
Address: P O BOX 173779
City: DENVER State: CO Zip: 80217-

Findings:

17 Number of Comments
0 Number of Corrective Actions
 Corrective Action Response Requested

Contact Information:

| Contact Name | Phone | Email | Comment |
|--------------|-------|-------------------------------|---------------------------------|
| | | COGCCinspections@anadarko.com | All Inspections |

Inspected Facilities:

| Facility ID | Type | Status | Status Date | Well Class | API Num | Facility Name | Insp Status |
|-------------|------|--------|-------------|------------|-----------|------------------|-------------|
| 419141 | WELL | PR | 07/12/2011 | OW | 123-32148 | WILDFLOWER 16-27 | PR |
| 419150 | WELL | PR | 07/20/2011 | OW | 123-32154 | WILDFLOWER 37-27 | PR |
| 419153 | WELL | PR | 07/11/2011 | OW | 123-32155 | WILDFLOWER 15-27 | PR |
| 419197 | WELL | PR | 07/11/2011 | OW | 123-32177 | WILDFLOWER 23-27 | PR |

General Comment:

Location

Overall Good:

Signs/Marker:

| | | | |
|--------------------|----------------------|-------|--|
| Type | WELLHEAD | | |
| Comment: | SATISFACTORY | | |
| Corrective Action: | | Date: | |
| Type | WELLHEAD | | |
| Comment: | SATISFACTORY | | |
| Corrective Action: | | Date: | |
| Type | TANK LABELS/PLACARDS | | |
| Comment: | SATISFACTORY | | |
| Corrective Action: | | Date: | |

Emergency Contact Number:

| | | | |
|--------------------|--------------|-------|-------|
| Comment: | SATISFACTORY | | |
| Corrective Action: | | Date: | _____ |

Overall Good:

Spills:

| Type | Area | Volume | | |
|------|------|--------|--|--|
| | | | | |

In Containment: No

Comment: _____

Multiple Spills and Releases?

Fencing/:

| | | | |
|--------------------|---------------------|-------|--|
| Type | WELLHEAD | | |
| Comment: | Architectural steel | | |
| Corrective Action: | | Date: | |

Equipment:

| | | | |
|--------------------|--|-------|-----------------|
| Type: Other | # | | corrective date |
| Comment: | Refer to inspection # 668302342 for information concerning shared battery and equipment. | | |
| Corrective Action: | | Date: | |
| Type: Plunger Lift | # 4 | | |
| Comment: | SATISFACTORY | | |
| Corrective Action: | | Date: | |

Tanks and Berms:

| Contents | # | Capacity | Type | Tank ID | SE GPS |
|--------------------|--|----------|------|---------|--------|
| | | | | | |
| Comment: | Refer to inspection # 668302342 for information concerning shared battery and equipment. | | | | |
| Corrective Action: | | Date: | | | |

Paint

| | |
|------------------|--|
| Condition | |
| Other (Content) | |
| Other (Capacity) | |
| Other (Type) | |

Berms

| Type | Capacity | Permeability (Wall) | Permeability (Base) | Maintenance |
|--------------------|----------|---------------------|---------------------|-------------|
| | | | | |
| Comment: | | | | |
| Corrective Action: | | | | Date: |

Venting:

| Yes/No | NO | | |
|--------------------|----|--|-------|
| | | | |
| Comment: | | | |
| Corrective Action: | | | Date: |

Flaring:

| | |
|--------------------|-------|
| Type | |
| Comment: | |
| Corrective Action: | Date: |

| Inspected Facilities | | | |
|--|--|------------------------------|---|
| Facility ID: <u>419141</u> | Type: <u>WELL</u> | API Number: <u>123-32148</u> | Status: <u>PR</u> Insp. Status: <u>PR</u> |
| Producing Well | | | |
| Comment: <u>PR</u> | Corrective Action: <input style="width: 100%;" type="text"/> | | Date: <input style="width: 100%;" type="text"/> |
| BradenHead | | | |
| Comment: <u>Bradenhead is plumed to surface.</u> | Corrective Action: <input style="width: 100%;" type="text"/> | | Date: <input style="width: 100%;" type="text"/> |
| Facility ID: <u>419150</u> | Type: <u>WELL</u> | API Number: <u>123-32154</u> | Status: <u>PR</u> Insp. Status: <u>PR</u> |
| Producing Well | | | |
| Comment: <u>PR</u> | Corrective Action: <input style="width: 100%;" type="text"/> | | Date: <input style="width: 100%;" type="text"/> |
| BradenHead | | | |
| Comment: <u>Bradenhead is plumed to surface.</u> | Corrective Action: <input style="width: 100%;" type="text"/> | | Date: <input style="width: 100%;" type="text"/> |
| Facility ID: <u>419153</u> | Type: <u>WELL</u> | API Number: <u>123-32155</u> | Status: <u>PR</u> Insp. Status: <u>PR</u> |
| Producing Well | | | |
| Comment: <u>PR</u> | Corrective Action: <input style="width: 100%;" type="text"/> | | Date: <input style="width: 100%;" type="text"/> |
| BradenHead | | | |
| Comment: <u>Bradenhead is plumed to surface.</u> | Corrective Action: <input style="width: 100%;" type="text"/> | | Date: <input style="width: 100%;" type="text"/> |
| Facility ID: <u>419197</u> | Type: <u>WELL</u> | API Number: <u>123-32177</u> | Status: <u>PR</u> Insp. Status: <u>PR</u> |
| Producing Well | | | |
| Comment: <u>PR</u> | Corrective Action: <input style="width: 100%;" type="text"/> | | Date: <input style="width: 100%;" type="text"/> |
| BradenHead | | | |
| Comment: <u>Bradenhead is plumed to surface.</u> | Corrective Action: <input style="width: 100%;" type="text"/> | | Date: <input style="width: 100%;" type="text"/> |

Environmental

Spill/Remediation:

Comment:

Corrective Action: Date:

Emission Control Burner (ECB): YES

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: _____

1002 SITE PREPARATION AND STABILIZATION

1002a. FENCING _____

Comment _____

Corrective Action _____

Date _____

1002b. SOIL REMOVAL AND SEGREGATION _____

Comment _____

Corrective Action _____

Date _____

1002c. PROTECTION OF SOILS _____

Comment _____

Corrective Action _____

Date _____

1002E. SURFACE DISTURBANCE MINIMIZATION _____

Comment _____

Corrective Action _____

Date _____

1003a. Waste and Debris removed? Pass

Comment _____

Corrective Action _____

Date _____

Unused or unneeded equipment onsite? Pass

Comment _____

Corrective Action _____

Date _____

Pit, cellars, rat holes and other bores closed? Pass

Comment _____

Corrective Action _____

Date _____

Guy line anchors marked? Pass

Comment _____

Corrective Action _____

Date _____

1003b. Area no longer in use? _____ Production areas stabilized ? Pass

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? Pass Segregated soils have been replaced? _____

RESTORATION AND REVEGETATION

Cropland

Top soil replaced Pass Recontoured Pass Perennial forage re-established In

Non-Cropland

Top soil replaced _____ Recontoured _____ 80% Revegetation _____

1003e. INTERIM VEGETATION TRANSECT

TRANSECT RESULTS OF DISTURBED AREA% _____

TRANSECT RESULTS OF REFERENCE AREA% _____

TOTAL % OF DESIRABLE VEGETATION COVER _____

VEGETATIVE COVER _____

1003 f. Weeds Noxious weeds? _____

Comment _____

Corrective Action _____

Date _____

Overall Interim Reclamation In Process

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 _____

1004.d. FINAL VEGETATION TRANSECT

TRANSECT RESULTS OF DISTURBED AREA% _____

TRANSECT RESULTS OF REFERENCE AREA% _____

TOTAL % OF DESIRABLE VEGETATION COVER _____

VEGETATIVE COVER _____

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 | | | |

Comment:

Corrective Action:

Date: _____

Pits: NO SURFACE INDICATION OF PIT