

**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:
02/02/2017
Submitted Date:
02/02/2017
Document Number:
672500377

FIELD INSPECTION FORM

Loc ID 444349 Inspector Name: Gomez, Jason 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:
6 Number of Comments
0 Number of Corrective Actions
 Corrective Action Response Requested

Contact Information:

Contact Name	Phone	Email	Comment
		COGCCinspections@anadarko.com	All Inspections
Adamczyk, Megan		megan.adamczyk@state.co.us	

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
444346	WELL	DG	12/28/2016	LO	123-42571	GARFIELD 28N-14HZ	DG
444347	WELL	DG	12/27/2016	LO	123-42572	GARFIELD 36N-35HZ	DG
444348	WELL	DG	12/30/2016	LO	123-42573	GARFIELD 15C-35HZ	DG
444351	WELL	DG	01/02/2017	LO	123-42575	GARFIELD 37N-35HZ	DG
444352	WELL	DG	12/31/2016	LO	123-42576	GARFIELD 15N-35HZ	DG
444355	WELL	DG	12/29/2016	LO	123-42579	GARFIELD 2N-14HZ	DG
444357	WELL	DG	01/01/2017	LO	123-42581	GARFIELD 27C-14HZ	DG

General Comment:

Location

Overall Good:

Emergency Contact Number:

Comment:

Corrective Action:

Date: _____

Overall Good:

Spills:

Type	Area	Volume		

In Containment: No

Comment:

Multiple Spills and Releases?

Equipment:

Type				corrective date
Ancillary equipment	# 1			
Comment:	APPROX 32 SOUND WALLS			
Corrective Action:				Date: _____

Venting:

Yes/No			
Comment:			
Corrective Action:			Date: _____

Flaring:

Type	Field Flare		
Comment:	NOT IN USE AT TIME OF INSPECTION		
Corrective Action:			Date: _____

Inspected Facilities

Facility ID: 444346 Type: WELL API Number: 123-42571 Status: DG Insp. Status: DG

Complaint

Comment: DOC# 200441018
 Corrective Action: _____ Date: _____

Well Drilling

Rig: Rig Name: NABORS X22 Pusher/Rig Manager: _____
 Permit Posted: _____ Access Sign: _____

Well Control Equipment:

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

Drill Fluids Management:

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

Comment: ALL LIGHTING POINTED DOWN TOWAR THE GROUND
 Corrective Action: _____ Date: _____

Facility ID: 444347 Type: WELL API Number: 123-42572 Status: DG Insp. Status: DG

Facility ID: 444348 Type: WELL API Number: 123-42573 Status: DG Insp. Status: DG

Facility ID: 444351 Type: WELL API Number: 123-42575 Status: DG Insp. Status: DG

Facility ID: 444352 Type: WELL API Number: 123-42576 Status: DG Insp. Status: DG

Facility ID: 444355 Type: WELL API Number: 123-42579 Status: DG Insp. Status: DG

Facility ID: 444357 Type: WELL API Number: 123-42581 Status: DG Insp. Status: DG

Reclamation - Storm Water - Pit

Storm Water:

Loc Erosion BMPs	BMP Maintenance	Lease Road Erosion BMPs	Lease BMP Maintenance	Chemical BMPs	Chemical BMP Maintenance	Comment
Ditches	Pass			Vehicle Tracking	Pass	
Gravel	Pass			Material Handling And Spill Prevention	Pass	
Compaction	Pass	Compaction	Pass	Covering Materials	Pass	

Comment:

Corrective Action:

Date: _____

Pits: NO SURFACE INDICATION OF PIT

COGCC Comments

Comment	User	Date
NO VIOLATIONS OF COGCC WERE OBSERVED AT THE TIME OF THE INSPECTION	gomezj	02/02/2017