

**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:

05/31/2017

Submitted Date:

06/01/2017

Document Number:

678800212**FIELD INSPECTION FORM**

Loc ID 318160 Inspector Name: LEONARD, MIKE On-Site Inspection ☐ 2A Doc Num: _____

Operator Information:OGCC Operator Number: 46290Name of Operator: K P KAUFFMAN COMPANY INCAddress: 1675 BROADWAY, STE 2800City: DENVER State: CO Zip: 80202**Status Summary:**☐ THIS IS A FOLLOW UP INSPECTION☒ FOLLOW UP INSPECTION REQUIRED☐ NO FOLLOW UP INSPECTION REQUIRED**Findings:**9 Number of Comments1 Number of Corrective Actions☒ Corrective Action Response Requested**Contact Information:**

| Contact Name | Phone | Email | Comment |
|-------------------|----------------|---------------|---------------------------------|
| Lara-Mesa, Susana | (303) 825-4822 | cogcc@kpk.com | All Inspections |

Inspected Facilities:

| Facility ID | Type | Status | Status Date | Well Class | API Num | Facility Name | Insp Status |
|-------------|------|--------|-------------|------------|-----------|-------------------------------|-------------|
| 240741 | WELL | PR | 06/20/1995 | OW | 123-08529 | JAMES S. HALEY TRUSTEE B 1 | EG |

General Comment:[2017 Flowline NTO Inspection Statewide](#)

LocationOverall Good: ☐

| | | | |
|----------------------|---|-------|------------|
| Signs/Marker: | | | |
| Type | WELLHEAD | | |
| Comment: | Operator Name and contact portion washed out and difficult to read. See atatched photo | | |
| Corrective Action: | Per 210.e. Operators shall maintain signs in a legible condition, and shall replace damaged or vandalized signs within sixty (60) days. | Date: | 08/01/2017 |

| | | | |
|---------------------------|--|--|-------------|
| Emergency Contact Number: | | | |
| Comment: | | | |
| Corrective Action: | | | Date: _____ |

Overall Good: ☒

| | | | | |
|----------------|------|--------|--|--|
| Spills: | | | | |
| Type | Area | Volume | | |

In Containment: No

Comment: ☐ Multiple Spills and Releases?

| | | | |
|--------------------|------------|-------|--|
| Fencing/: | | | |
| Type | PUMP JACK | | |
| Comment: | Angle Iron | | |
| Corrective Action: | | Date: | |

| | | | |
|---------------------------|--|-------|-----------------|
| Equipment: | | | corrective date |
| Type: Prime Mover | # 1 | | |
| Comment: | Electric Motor | | |
| Corrective Action: | | Date: | |
| Type: Pump Jack | # 1 | | |
| Comment: | Standard | | |
| Corrective Action: | | Date: | |
| Type: Ancillary equipment | # 3 | | |
| Comment: | Electrical transformers and power box west of pumpjack | | |
| Corrective Action: | | Date: | |
| Type: Flow Line | # | | |
| Comment: | 1 - 2" riser for flowline at wellhead. GPS 40.07877/-104.97319 | | |
| Corrective Action: | | Date: | |

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

| | | |
|-----------------|--|--|
| Flaring: | | |
| Type | | |
| Comment: | | |

| | | | |
|--------------------|--|-------|--|
| Corrective Action: | | Date: | |
|--------------------|--|-------|--|

Inspected FacilitiesFacility ID: 240741 Type: WELL API Number: 123-08529 Status: PR Insp. Status: EG**Idle Well**Purpose: ☒ Shut In ☐ Temporarily Abandoned

Reminder: _____

Comment: Well shut in at time of inspection

Corrective Action: _____

Date: _____

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

| Document Num | Description | URL |
|--------------|----------------------|---|
| 401298038 | INSPECTION SUBMITTED | http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4160531 |
| 678800213 | Inspection Photos | http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4160525 |