

FORM
INSPRev
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:

04/16/2018

Submitted Date:

04/16/2018

Document Number:

690001401

FIELD INSPECTION FORM

Loc ID _____ Inspector Name: _____ On-Site Inspection
331348 _____ Carlile, Craig _____ 2A Doc Num: _____

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- _____

Status Summary:

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

Findings:

3 _____ Number of Comments
0 _____ Number of Corrective Actions
 Corrective Action Response Requested

Contact Information:

Contact Name	Phone	Email	Comment
Leonard, Mike		mike.leonard@state.co.us	
, Inspections		COGCCinspections@Anadarko.com	All Inspections

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
260677	WELL	SI	05/01/2017	GW	123-20535	HSR WELD 3-2A	PA

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	Area	Volume	corrective date
Type: Pig Station		# 0	
Comment:	<input type="text"/>		
Corrective Action:			Date:
Type: Plunger Lift		# 0	
Comment:	<input type="text"/>		
Corrective Action:			Date:

Venting:

Yes/No	<input type="text"/>		
Comment:	<input type="text"/>		
Corrective Action:			Date:

Flaring:

Type	<input type="text"/>		
Comment:	<input type="text"/>		
Corrective Action:			Date:

Inspected Facilities

Facility ID: 260677 Type: WELL API Number: 123-20535 Status: SI Insp. Status: PA

Cement

Cement Contractor

Contractor Name: _____

Contractor Phone: _____

Surface Casing

Cement Volume (sx): _____

Circulate to Surface: _____

Cement Fall Back: _____

Top Job, 1" Volume: _____

Intermediate Casing

Cement Volume (sxs): _____

Good Return During Job: _____

Production Casing

Cement Volume (sx): _____

Good Return During Job: _____

Plugging Operations

Depth Plugs(feet range): _____

Cement Volume (sx): _____

Good Return During Job: _____

Cement Type: _____

Comment: Well plugged.
Form 6: 401379280

Corrective Action: _____

Date: _____

COGCC Comments

Comment	User	Date
Well has been plugged and battery removed. Subsequent to previous inspection gas meter run and pig station have been removed.	carlilec	04/16/2018

Attached Documents

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

Document Num	Description	URL
690001402	Photos	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4435003