

**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:

04/12/2018

Submitted Date:

04/24/2018

Document Number:

689801068**FIELD INSPECTION FORM**

Loc ID      Inspector Name:      On-Site Inspection ☐  
 312777      Waldron, Emily      2A Doc Num: \_\_\_\_\_

**Operator Information:**OGCC Operator Number: 45898Name of Operator: KAISER-FRANCIS OIL COMPANYAddress: P O BOX 21468City: TULSA      State: OK      Zip: 74121**Status Summary:**☐ THIS IS A FOLLOW UP INSPECTION☒ FOLLOW UP INSPECTION REQUIRED☐ NO FOLLOW UP INSPECTION REQUIRED**Findings:**5 Number of Comments2 Number of Corrective Actions☒ Corrective Action Response Requested**Contact Information:**

| Contact Name             | Phone | Email             | Comment                          |
|--------------------------|-------|-------------------|----------------------------------|
| VanValkenburg, Charlotte |       | CharlotV@kfoc.net | <a href="#">Official Contact</a> |

**Inspected Facilities:**

| Facility ID | Type | Status | Status Date | Well Class | API Num   | Facility Name | Insp Status |
|-------------|------|--------|-------------|------------|-----------|---------------|-------------|
| 222375      | WELL | PR     | 09/01/2014  | GW         | 081-05366 | GOOCH 2-33    | SI          |

**General Comment:**[Routine FIU inspection.](#)

**Location**Overall Good: ☒

|                      |  |       |            |
|----------------------|--|-------|------------|
| <b>Signs/Marker:</b> |  |       |            |
| Type                 | BATTERY  |       |            |
| Comment:             | Sign not posted or information inaccurate at well(s) or battery.<br>Sign at entrance is incomplete and inaccurate. |       |            |
| Corrective Action:   | Install sign to comply with Rule 210.b.  | Date: | 06/25/2018 |
| Type                 | WELLHEAD   |       |            |
| Comment:             |  |       |            |
| Corrective Action:   |  | Date: |            |

Emergency Contact Number:

 Comment: 405-262-5511  
 307-635-2890

Corrective Action:

Date:

Overall Good: ☒

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

In Containment: No

Comment:

☐ Multiple Spills and Releases?

|                    |          |       |  |
|--------------------|----------|-------|--|
| <b>Fencing/:</b>   |          |       |  |
| Type               | WELLHEAD |       |  |
| Comment:           |          |       |  |
| Corrective Action: |          | Date: |  |

|                          |     |       |                 |
|--------------------------|-----|-------|-----------------|
| <b>Equipment:</b>        |     |       | corrective date |
| Type: Pump Jack          | # 1 |       |                 |
| Comment:                 |     |       |                 |
| Corrective Action:       |     | Date: |                 |
| Type: Deadman # & Marked | # 4 |       |                 |
| Comment:                 |     |       |                 |
| Corrective Action:       |     | Date: |                 |

**Venting:**

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

**Flaring:**

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

| Inspected Facilities |        |       |      |             |           |         |    |               |    |
|----------------------|--------|-------|------|-------------|-----------|---------|----|---------------|----|
| Facility ID:         | 222375 | Type: | WELL | API Number: | 081-05366 | Status: | PR | Insp. Status: | SI |
| Producing Well       |        |       |      |             |           |         |    |               |    |
| Comment:             |        |       |      |             |           |         |    |               |    |
| 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 |
|------------------|-----------------|-------------------------|-----------------------|---------------|--------------------------|---------|
|                  |                 |                         |                       |               |                          |         |

Comment: [Erosion occurring on access road.](#)Corrective Action: [Install or repair required BMPs per Rule 1002.f.](#)

Date: 05/24/2018

**Pits:** ☐ NO SURFACE INDICATION OF PIT**Attached Documents**You can go to COGCC Images (<https://cogcc.state.co.us/weblink/>) and search by document number:

| Document Num | Description          | URL   |
|--------------|----------------------|---|
| 401618472    | INSPECTION SUBMITTED | <a href="http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4443587">http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4443587</a> |
| 689801074    | Inspection Photos    | <a href="http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4443583">http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4443583</a> |