

**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:

01/07/2019

Submitted Date:

01/07/2019

Document Number:

679702490**FIELD INSPECTION FORM**

Loc ID Inspector Name: On-Site Inspection ☐
 316456 Moran, Rick 2A Doc Num: _____

Operator Information:OGCC Operator Number: 47200Name of Operator: KGH OPERATING COMPANYAddress: P O BOX 2235City: BILLINGS State: MT Zip: 59103-**Status Summary:**

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

Findings:6 Number of Comments1 Number of Corrective Actions☒ Corrective Action Response Requested**ANY CORRECTIVE ACTION(S) FROM
PREVIOUS INSPECTIONS THAT HAVE NOT
BEEN ADDRESSED ARE STILL APPLICABLE****Contact Information:**

Contact Name	Phone	Email	Comment
Waldron, Emily		emily.waldron@state.co.us	
Kellerby, Shaun	970-712-1248	shaun.kellerby@state.co.us	
Hohn, Thomas	406-655-3381	kgh@hohneng.com	All inspections

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
277647	WELL	PR	08/02/2005	GW	103-10565	FEDERAL 26-5	PR

General Comment:[routine well inspection](#)

LocationOverall Good: ☒

Signs/Marker:			
Type	BATTERY		
Comment:	Sign or label not posted or information inaccurate on tanks or containers. Label missing on 1 tank. The label on the other tank is starting to fall off.		
Corrective Action:	Install sign to comply with Rule 210.d.	Date:	03/11/2019

Emergency Contact Number:

Comment: 406-655-3381

Corrective Action:

Date: _____

Overall Good: ☒

Spills:				
Type	Area	Volume		

In Containment: No

Comment:

☐ Multiple Spills and Releases?

Equipment:			corrective date
Type: Ancillary equipment	# 1		
Comment:	One container of methanol with secondary containment.		
Corrective Action:		Date:	
Type: Gas Meter Run	# 1		
Comment:			
Corrective Action:		Date:	
Type: Pump Jack	# 1		
Comment:			
Corrective Action:		Date:	
Type: Horizontal Heated Separator	# 1		
Comment:			
Corrective Action:		Date:	
Type: Deadman # & Marked	# 2		
Comment:			
Corrective Action:		Date:	

Tanks and Berms:

Contents	#	Capacity	Type	Tank ID	SE GPS
CONDENSATE	2	300 BBLS	STEEL AST		39.934140,-109.043300
Comment:					
Corrective Action:					Date:

Paint

Condition	Adequate	
Other (Content)		
Other (Capacity)		
Other (Type)		

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance	
Earth	Adequate	Walls Sufficient	Base Sufficient	Adequate	
Comment:					
Corrective Action:					Date:

Venting:

Yes/No	NO		
Comment:			
Corrective Action:			Date:

Flaring:

Type			
Comment:			
Corrective Action:			Date:

Inspected Facilities									
Facility ID:	277647	Type:	WELL	API Number:	103-10565	Status:	PR	Insp. Status:	PR
Producing Well									
Comment:	producing well on plunger lift								
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
Compaction		Compaction				
Berms						

Comment: Corrective Action: Date: **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
401896138	INSPECTION SUBMITTED	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4696691
679702491	inspection photos	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4696681