

**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:

04/02/2019

Submitted Date:

04/02/2019

Document Number:

674301876

FIELD INSPECTION FORM

Loc ID 332574 Inspector Name: Peterson, Tom On-Site Inspection ☐ 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:

2 Number of Comments

0 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
,		cogccinspections@anadarko.com	

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
286654	WELL	PR	05/01/2018	GW	123-24265	PLATTE 25-35	SI

General Comment:

LocationOverall Good: ☒**Signs/Marker:**

Type	WELLHEAD		
Comment:			
Corrective Action:		Date:	

Emergency Contact Number:

Comment:		
Corrective Action:		Date: _____

Overall Good: ☒**Spills:**

Type	Area	Volume		
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In Containment: No

Comment: _____

☐ Multiple Spills and Releases?**Fencing/:**

Type	WELLHEAD		
Comment:	Panel		
Corrective Action:		Date:	

Equipment:

Type: Flow Line	# 1		corrective date
Comment:			
Corrective Action:		Date:	
Type: Plunger Lift	# 1		
Comment:			
Corrective Action:		Date:	

Tanks and Berms:

Contents	#	Capacity	Type	Tank ID	SE GPS
			CENTRALIZED BATTERY		,
Comment:	Location #332626				
Corrective Action:				Date:	

Paint

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

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance

Comment:		
Corrective Action:		Date: <input type="text"/>
<u>Venting:</u>		
Yes/No	NO	
Comment:		
Corrective Action:		Date: <input type="text"/>
<u>Flaring:</u>		
Type		
Comment:		
Corrective Action:		Date: <input type="text"/>

Inspected Facilities									
Facility ID:	286654	Type:	WELL	API Number:	123-24265	Status:	PR	Insp. Status:	SI
Idle Well									
Purpose: <input checked="" type="checkbox"/> Shut In <input type="checkbox"/> Temporarily Abandoned Reminder: _____									
Comment: _____									
Corrective Action: _____ Date: _____									

Environmental	
Spill/Remediation:	
Comment:	
Corrective Action:	Date:
Emission Control Burner (ECB): YES	
Comment:	
Pilot: OFF	Wildlife Protection Devices (fired vessels): YES

Reclamation - Storm Water - Pit**Storm Water:**

Loc Erosion BMPs	BMP Maintenance	Lease Road Erosion BMPs	Lease BMP Maintenance	Chemical BMPs	Chemical BMP Maintenance	Comment
Gravel	Pass	Gravel	Pass			

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
674301877	Photo	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4782214