

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:

04/16/2019

Submitted Date:

04/16/2019

Document Number:

678302436

FIELD INSPECTION FORM

Loc ID 318053 Inspector Name: GINTAUTAS, PETER On-Site Inspection 2A Doc Num: _____

Status Summary:

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

Operator Information:

OGCC Operator Number: 46290
 Name of Operator: KP KAUFFMAN COMPANY INC
 Address: 1675 BROADWAY, STE 2800
 City: DENVER State: CO Zip: 80202

Findings:

3 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
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
240510	WELL	PR	07/01/2017	GW	123-08298	GUADAGNOLI 1	EI
463757	TANK BATTERY	AC	04/03/2019		-	Guadagnoli 1 & 2 battery	EI

General Comment:

[follow-up inspection to 678302434](#)
[equipment as in previous inspection](#)

Location

Overall Good:

Emergency Contact Number:

Comment:

Corrective Action:

Date: _____

Overall Good:

Spills:

Type	Area	Volume			

In Containment: No

Comment:

Multiple Spills and Releases?

Tanks and Berms:

Contents	#	Capacity	Type	Tank ID	SE GPS
CRUDE OIL	1	300 BBLs	STEEL AST		,
Comment: <input type="text" value="no ongoing leak form tank observed"/>					
Corrective Action: <input type="text"/>					Date: <input type="text"/>

Paint

Condition	<input type="text"/>
Other (Content)	<input type="text"/>
Other (Capacity)	<input type="text"/>
Other (Type)	<input type="text"/>

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Comment: <input type="text"/>				Date: <input type="text"/>
Corrective Action: <input type="text"/>				Date: <input type="text"/>

Venting:

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

Flaring:

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

Inspected Facilities

Facility ID: 240510 Type: WELL API Number: 123-08298 Status: PR Insp. Status: EI

Facility ID: 463757 Type: TANK API Number: - Status: AC Insp. Status: EI