

**FORM
INSP**

Rev
X/20

**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:

12/21/2021

Submitted Date:

12/21/2021

Document Number:

699304696

FIELD INSPECTION FORM

Loc ID 332996 Inspector Name: Revas, Robbie 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:

5 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@Oxy.com	All Inspections

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
262597	WELL	PA	10/14/2019	GW	123-20767	JOHNSON 7-30A	PA

General Comment:

(This area is intentionally left blank for general comments.)

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	#	Comment	Corrective Action	Date	corrective date
Type: Bradenhead	# 1	Comment: belongs to KP Kauffman well	Corrective Action:	Date:	
Type: Horizontal Heater Treater	# 0	Comment:	Corrective Action:	Date:	
Type: Plunger Lift	# 0	Comment:	Corrective Action:	Date:	
Type: Pump Jack	# 0	Comment:	Corrective Action:	Date:	
Type: Bird Protectors	# 0	Comment:	Corrective Action:	Date:	
Type: Ancillary equipment	# 1	Comment: electric panel belongs to KP Kauffman well	Corrective Action:	Date:	
Type: Gas Meter Run	# 0	Comment:	Corrective Action:	Date:	

Tanks and Berms:

Contents	#	Capacity	Type	Tank ID	SE GPS
CRUDE OIL	0				,
Comment:					
Corrective Action:					Date:

Paint

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

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Comment:				
Corrective Action:				Date:

Contents	#	Capacity	Type	Tank ID	SE GPS
PRODUCED WATER	0				
Comment:					
Corrective Action:					Date:

Paint

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

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Comment:				
Corrective Action:				Date:

Venting:

Yes/No	NO		
Comment:			
Corrective Action:		Date:	

Flaring:

Type	
Comment:	
Corrective Action:	Date:

Inspected Facilities

Facility ID: 262597 Type: WELL API Number: 123-20767 Status: PA Insp. Status: PA

Idle Well

Purpose: Shut In Temporarily Abandoned Reminder: _____

Comment:

Corrective Action:

Date: _____

