

**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:

01/30/2024

Submitted Date:

01/31/2024

Document Number:

714300035**FIELD INSPECTION FORM**Loc ID 478711 Inspector Name: Brown, Kari On-Site Inspection ☐ 2A Doc Num: **Operator Information:**OGCC Operator Number: 46290Name of Operator: KP KAUFFMAN COMPANY INCAddress: 1700 LINCOLN ST STE 4550City: DENVER State: CO Zip: 80203**Status Summary:**

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

Findings:8 Number of Comments4 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
Peterson, John		jpeterson@kpk.com	KPK environmental
Watzman, Ross	(303) 825-4822	rwatzman@kpk.com	all inspections.
, KPK		cogcc@kpk.com	All Inspections
Graber, Nikki		nikki.graber@state.co.us	

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
483793	SPILL OR RELEASE	AC	02/14/2023		-	Grenemeyer 1-A Flowline Release	EI

General Comment:

This is an environmental inspection to determine progress on Spill ID 483793. Any corrective actions from previous inspections or COAs that have not been addressed are still applicable.

When ECMC staff arrived on location a slow leak was observed from a valve off the separator. ECMC called KPK emergency line at 10:33am to provide notification of the leak. KPK personnel arrived on location at 10:44am to initiate repairs.

Photos attached to document site conditions.

LocationOverall Good: ☐

Emergency Contact Number:

Comment:

Corrective Action:

Date: _____

Overall Good: ☐**Spills:**

Type	Area	Volume		
Comment:	Separator leak created spill area of approximately 5'x5' of hydrocarbon impacted soil.			
Corrective Action:	Properly dispose of oily waste in accordance with 905.e. If during clean up the spill becomes reportable Operator shall notify ECMC and submit a Form 19 in accordance with Rule 912.b.			Date: <u>02/07/2024</u>

In Containment: No

Comment:

☐ Multiple Spills and Releases?**Equipment:**

			corrective date
Type: Horizontal Separator	#		
Comment:	Active slow leak observed at separator. Prior to ECMC staff leaving location KPK personnel arrived to initiate repairs.		
Corrective Action:	Securely fasten all valves, pipes, fittings, and Production Facilities to ensure good mechanical condition, inspect at regular intervals and maintain in good mechanical condition per Rule 608.e.		
		Date:	<u>01/30/2024</u>

Venting:

Yes/No			
Comment:			
Corrective Action:		Date:	

Flaring:

Type			
Comment:			
Corrective Action:		Date:	

Inspected Facilities									
Facility ID:	483793	Type:	SPILL OR	API Number:	-	Status:	AC	Insp. Status:	EI

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Environmental**Spills/Releases:**

Type of Spill: _____

Estimated Spill Volume: _____

Comment: No remedial work has been conducted at spill ID 483793. Orange fencing surrounds the area where the spill has surfaced.Corrective Action: In accordance with 913.d.(1) Operator will investigate impacts to soil, Groundwater, and surface water as soon as the impacts are discovered.

Date: _____

Reportable: _____

GPS: Lat _____

Long _____

Proximity to Surface Water: _____

Depth to Ground Water: _____

Water Well Complaint:

Lat _____

Long _____

DWR Receipt Num: _____

Owner Name: _____

GPS : _____

Field Parameters:

Sample Location: _____

Comment: _____

Spill/Remediation:Comment: Spill ID 482955 remains open past 90 days (date of discovery 2/1/2023).Corrective Action: Pursuant to Rule 912.b.(6) Operator is required to submit a Form 19 Supplemental Report for the associated spill within 90 days of the spill date requesting closure pursuant to Rule 913.h and supported by adequate documentation to demonstrate that the Spill or Release has been fully cleaned up and complies with Table 915-1; or A Form 27 if any of the criteria listed in Rules 912.b.(6).B.i±iii apply. If Remediation will continue under an approved Form 27, the Operator will also submit a Form 19± Supplemental which requests closure of the Spill or Release and includes the Remediation project number assigned by the Director.

Date: _____

Emission Control Burner (ECB): _____

Comment: _____

Pilot: _____ Wildlife Protection Devices (fired vessels): _____

Attached DocumentsYou can go to COGCC Images (<https://cogcc.state.co.us/webblink/>) and search by document number:

Document Num	Description	URL
403673198	INSPECTION SUBMITTED	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=6414446
714300036	Inspection photos	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=6414435