

**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:

06/12/2024

Submitted Date:

06/25/2024

Document Number:

697602390

FIELD INSPECTION FORMLoc ID _____ Inspector Name: _____ On-Site Inspection ☐
Ahmadian, Alexander 2A Doc Num: _____**Operator Information:**

ECMC Operator Number: 46290

Name of Operator: KP KAUFFMAN COMPANY INC

Address: 1700 LINCOLN ST STE 4550

City: 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 Comments

3 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 |
|------------------|--------------|-----------------------------|-------------------|
| Anderson, Laurel | | laurel.anderson@state.co.us | |
| MacLaren, Joe | | joe.maclaren@state.co.us | |
| , | | cogcc@kpk.com | All Inspections |
| Brown, Kari | | kari.oakman@state.co.us | |
| Watzman, Ross | 303-825-4822 | rwatzman@kpk.com | |
| Graber, Nikki | | nikki.graber@state.co.us | |
| Peterson, John | | jpeterson@kpk.com | KPK environmental |

Inspected Facilities:

| Facility ID | Type | Status | Status Date | Well Class | API Num | Facility Name | Insp Status |
|-------------|------------------------------|--------|-------------|------------|---------|---------------|-------------|
| 479019 | OFF- LOCATION FLOWLINE | AC | 01/04/2021 | | - | Wellhead Line | EI |

General Comment:

COGCC environmental inspection to determine progress on Spill ID 487060 / UPRR 42 PAN AM E 2 Flowline. Any corrective actions from previous inspections that have not been addressed are still applicable. There was Operator personnel were onsite addressing the spill. Photos attached to document site conditions.

| | | | |
|--|---|----------------------------|------------------|
| Location | | | |
| Overall Good: <input type="checkbox"/> | | | |
| Emergency Contact Number: | | | |
| Comment: <input type="text" value="Good"/> | | Date: <input type="text"/> | |
| Corrective Action: <input type="text"/> | | | |
| Good Housekeeping: | | | |
| Type | WEEDS | | |
| Comment: | Overgrown weeds located near the pumpjack/wellhead that need to be addressed. | | |
| Corrective Action: | Comply with Rule 606. | | Date: 07/02/2024 |
| Overall Good: <input type="checkbox"/> | | | |
| Spills: | | | |
| Type | Area | Volume | |
| In Containment: No | | | |
| Comment: | <input type="text" value="Spill being addressed by Operator personnel. Visible staining was observed within the small excavation along the flowline where the source of the spill was located."/> | | |
| <input type="checkbox"/> Multiple Spills and Releases? | | | |
| Fencing/: | | | |
| Type | | | |
| Comment: | No fencing at the time of the inspection because Operator personnel was working on the excavation. | | |
| Corrective Action: | | | Date: |
| Venting: | | | |
| Yes/No | | | |
| Comment: | | | |
| Corrective Action: | | | Date: |
| Flaring: | | | |
| Type | | | |
| Comment: | | | |
| Corrective Action: | | | Date: |

| Inspected Facilities | | | | | | | | | |
|--|--------|-------|------|-------------|---|---------|----|---------------|----|
| Facility ID: | 479019 | Type: | OFF- | API Number: | - | Status: | AC | Insp. Status: | EI |
| The subreport 'InspWellFlowline' could not be found at the specified location \\10.14.12 | | | | | | | | | |

Environmental**Waste Management:**

| Type | Management | Condition | GPS (Lat) | (Long) |
|--------------------|---|-----------|-----------|--------|
| Oily Soil | | | | |
| Comment: | Oily soil from the excavation was being stockpiled onto a liner. The stockpile had a sign indicating that the stockpile was contaminated. | | | |
| Corrective Action: | According to COA on Form 19 Initial Document #403822011, "Operator shall provide all waste manifests as required by Rule 905.b.(3) for oily waste hauled off site for disposal, including all fluid removed from the flowline." | | | Date: |

Spill/Remediation:

| | | | | |
|--------------------|--|--|--|------------------|
| Comment: | At the time of the inspection, Operator personnel were on site addressing and containing the spill. Oily impacted soil was observed in the small excavation where the spill location occurred. A Form 19 Initial Document #403822011 was submitted on 6/14/2024 for reporting requirements of spills or releases. | | | |
| 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: 09/09/2024 |

Emission Control Burner (ECB): _____

Comment: _____

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

Attached DocumentsYou can go to ECMC Images (<https://ecmc.state.co.us/weblink/>) and search by document number:

| Document Num | Description | URL |
|--------------|----------------------|---|
| 403835226 | INSPECTION SUBMITTED | https://ecmc.state.co.us/weblink/DownloadDocumentPDF.aspx?DocumentId=6600488 |
| 697602391 | Photolog | https://ecmc.state.co.us/weblink/DownloadDocumentPDF.aspx?DocumentId=6600484 |