

**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:
07/16/2024
Submitted Date:
07/16/2024
Document Number:
707801024

FIELD INSPECTION FORM

Loc ID 324617 Inspector Name: Ramsey, Scott On-Site Inspection 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:

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
, KPK		cogcc@kpk.com	All inspections
Burn, Diana		diana.burn@state.co.us	

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
212155	WELL	IJ	02/01/2021	ERIW	057-06048	MCCALLUM UNIT 70	IJ

General Comment:

[5 year MIT](#)

Inspected Facilities

Facility ID: 212155 Type: WELL API Number: 057-06048 Status: IJ Insp. Status: IJ

Underground Injection Control

UIC Violation: _____ Maximum Injection Pressure: _____

UIC Routine

Inj./Tube:	Pressure or inches of Hg _____ (e.g. 30 psig or -30" Hg)	Previous Test Pressure _____	MPP _____
TC:	Pressure or inches of Hg _____	Previous Test Pressure _____	Inj Zone: <u>PRREB</u>
Brhd:	Pressure or inches of Hg _____	Previous Test Pressure _____	Last MIT: <u>08/02/2019</u>
			AnnMTReq: _____

Comment:

Corrective Action: Date: _____

Method of Injection: _____

Test Type: 5 Year Tbg psi: 440 Csg psi: 840 BH psi: 0

Insp. Status: Pass

Comment:

Corrective Action: Date: _____

The subreport 'InspWellFlowline' could not be found at the specified location \\10.14.12