| FORM INSP Rev X/20 | State of Colorado<br>Oil and Gas Conservation Commission<br>1120 Lincoln Street, Suite 801, Denver, Colorado 80203<br>Phone: (303) 894-2100 Fax: (303) 894-2109<br><br>**FIELD INSPECTION FORM** | | Inspection Date:<br>10/23/2024<br>Submitted Date:<br>10/23/2024<br>Document Number:<br>716201070 |
|---|---|---|---|

| Loc ID | Inspector Name: | On-Site Inspection ☐ | **Status Summary:** |
|---|---|---|---|
| 332380 | Carlile, Craig | 2A Doc Num: | ☐ THIS IS A FOLLOW UP INSPECTION |

**Operator Information:**

ECMC 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:**

8   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 |
|---|---|---|---|
| , Oxy | | ECMCInspections@Oxy.com | All Inspections |

**Inspected Facilities:**

| Facility ID | Type | Status | Status Date | Well Class | API Num | Facility Name | Insp Status |
|---|---|---|---|---|---|---|---|
| 272340 | WELL | PR | 07/01/2024 | GW | 123-22221 | ANDERSON 8-9 | SI |

**General Comment:**

This is a routine Wellhead audit.
Any corrective actions and associated dates from previous audits or inspections that have not been resolved remain in effect.

Inspector Name: Carlile, Craig

## Location

Overall Good: ☒

**Signs/Marker:**

| | | | |
|---|---|---|---|
| Type | WELLHEAD | | |
| Comment: | | | |
| Corrective Action: | | Date: | |
| Type | TANK LABELS/PLACARDS | | |
| Comment: | | | |
| Corrective Action: | | Date: | |
| Type | BATTERY | | |
| Comment: | | | |
| Corrective Action: | | Date: | |

Emergency Contact Number:

Comment: 

Corrective Action: Date: _____

Overall Good: ☒

**Spills:**

| Type | Area | Volume | | | |
|---|---|---|---|---|---|

In Containment: No

Comment: 

☐ Multilple Spills and Releases?

**Fencing/:**

| | | | |
|---|---|---|---|
| Type | IGNITOR/COMBUSTOR | | |
| Comment: | Pipe panels | | |
| Corrective Action: | | Date: | |
| Type | WELLHEAD | | |
| Comment: | Pipe panels | | |
| Corrective Action: | | Date: | |

**Equipment:**

| | | | | corrective date |
|---|---|---|---|---|
| Type: Gas Meter Run | # 1 | | | |
| Comment: | | | | |
| Corrective Action: | | Date: | | |
| Type: Plunger Lift | # 1 | | | |
| Comment: | | | | |
| Corrective Action: | | Date: | | |
| Type: Emission Control Device | # 1 | | | |
| Comment: | | | | |
| Corrective Action: | | Date: | | |
| Type: Horizontal Heated Separator | # 1 | | | |

Inspector Name: Carlile, Craig

| Comment: | | | |
|---|---|---|---|
| Corrective Action: | | Date: | |

## Tanks and Berms:

| Contents | # | Capacity | Type | Tank ID | SE GPS | |
|---|---|---|---|---|---|---|
| CRUDE OIL | 1 | 300 BBLS | STEEL AST | | 40.241030,-104.774870 | |

| Comment: | | | |
|---|---|---|---|
| Corrective Action: | | Date: | |

Paint

| Condition | Adequate | |
|---|---|---|
| Other (Content) | | |
| Other (Capacity) | | |
| Other (Type) | | |

Berms

| Type | Capacity | Permeability (Wall) | Permeability (Base) | Maintenance | |
|---|---|---|---|---|---|
| Metal | Adequate | Walls Sufficent | Base Sufficient | Adequate | |

| Comment: | | | |
|---|---|---|---|
| Corrective Action: | | Date: | |

| Contents | # | Capacity | Type | Tank ID | SE GPS | |
|---|---|---|---|---|---|---|
| PRODUCED WATER | 1 | 100 BBLS | PBV FIBERGLASS | | , | |

| Comment: | | | |
|---|---|---|---|
| Corrective Action: | | Date: | |

Paint

| Condition | | |
|---|---|---|
| Other (Content) | | |
| Other (Capacity) | | |
| Other (Type) | | |

Berms

| Type | Capacity | Permeability (Wall) | Permeability (Base) | Maintenance | |
|---|---|---|---|---|---|
| | | | | | |

| Comment: | Shared with crude oil tank. | | |
|---|---|---|---|
| Corrective Action: | | Date: | |

## Venting:

| Yes/No | NO | | |
|---|---|---|---|
| Comment: | | | |
| Corrective Action: | | Date: | |

## Flaring:

| Type | Ignitor/Combustor | |
|---|---|---|
| Comment: | | |
| Corrective Action: | | Date: | |

## Inspected Facilities

| Facility ID: | 272340 | Type: | WELL | API Number: | 123-22221 | Status: | PR | Insp. Status: | SI |
|---|---|---|---|---|---|---|---|---|---|

### Idle Well

Purpose: ☒ Shut In ☐ Temporarily Abandoned      Reminder: _____

Comment: SI at wellhead connection with flow line.

Corrective Action: _____      Date: _____

### BradenHead

Date of Last Brhd Test: 07/16/2024      Annual Brhd Completed?  Yes

Last Brhd Test Results      Initial Surf Csg Pressure: 1      Fluid Type: None

End Surf Csg Pressure: --

Comment: Plumbed to surface.

Corrective Action: _____      Date: _____

The subreport 'InspWellFlowline' could not be found at the specified location \\10 14 12

## ECMC Comments

| Comment | User | Date |
|---|---|---|
| This is a routine Wellhead audit.<br>Any corrective actions and associated dates from previous audits or inspections that have not been resolved remain in effect. | carlilec | 10/23/2024 |

**Attached Documents**

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

| Document Num | Description | URL |
|---|---|---|
| 716201072 | Photos | https://ecmc.state.co.us/weblink/DownloadDocumentPDF.aspx?DocumentId=6757340 |