

**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:

01/10/2025

Submitted Date:

01/10/2025

Document Number:

715800527**FIELD INSPECTION FORM**Loc ID 336344 Inspector Name: Revas, Robbie On-Site Inspection ☐ 2A Doc Num: _____**Operator Information:**ECMC 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:13 Number of Comments0 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
Norton, Mathew		mnorton@kpk.com	
,		rwatzman@kpk.com	All Inspections
,		cogcc@kpk.com	All Inspections

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
241309	WELL	PR	09/01/2022	OW	123-09098	MARTIN T. HART D 2	PR

General Comment:[This is a wellsite inspection.](#)

LocationOverall Good: ☒**Signs/Marker:**

Type	WELLHEAD		
Comment:	adequate		
Corrective Action:		Date:	

Emergency Contact Number:

Comment:		Date:	
Corrective Action:		Date:	

Good Housekeeping:

Type			
Comment:	Dead vegetation around the wellsite needs to be addressed.		
Corrective Action:		Date:	

Overall Good: ☒**Spills:**

Type	Area	Volume		
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In Containment: No

Comment: ☐ Multiple Spills and Releases?**Fencing/:**

Type	WELLHEAD		
Comment:	barb wire		
Corrective Action:		Date:	
Type	PUMP JACK		
Comment:	Fabricated steel pipe		
Corrective Action:		Date:	
Type	OTHER		
Comment:	ancillary equipment: Fabricated steel pipe		
Corrective Action:		Date:	

Equipment:

Type: Bradenhead	# 1		corrective date
Comment:			
Corrective Action:		Date:	
Type: Prime Mover	# 1		
Comment:	electric motor		
Corrective Action:		Date:	
Type: Ancillary equipment	# 1		
Comment:	electric panel, meter box and transformers		
Corrective Action:		Date:	

Type: Pump Jack	# 1		
Comment:			
Corrective Action:		Date:	
<u>Venting:</u>			
Yes/No	NO		
Comment:			
Corrective Action:		Date:	
<u>Flaring:</u>			
Type			
Comment:			
Corrective Action:		Date:	

Inspected Facilities									
Facility ID:	241309	Type:	WELL	API Number:	123-09098	Status:	PR	Insp. Status:	PR
Producing Well									
Comment:		PR							
Corrective Action:								Date:	
BradenHead									
Date of Last Brhd Test:		06/07/2024		Annual Brhd Completed?		Yes			
Last Brhd Test Results		Initial Surf Csg Pressure:		0		Fluid Type:			
		End Surf Csg Pressure:		0					
Comment:		Plumbed to surface							
Corrective Action:								Date:	

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

Reclamation - Storm Water - Pit**Storm Water:**

Loc Erosion BMPs	BMP Maintenance	Lease Road Erosion BMPs	Lease BMP Maintenance	Chemical BMPs	Chemical BMP Maintenance	Comment

Comment: Corrective Action: Date: **Pits:** ☒ NO SURFACE INDICATION OF PIT**ECMC Comments**

Comment	User	Date
Routine Audit/Inspection Any corrective actions from previous Inspections that have not been addressed are still applicable Weather: Cloudy Temperature: 48* Location: Dry with some snow & mud.	revasr	01/10/2025

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

Document Num	Description	URL
715800528	location photos	https://ecmc.state.co.us/weblink/DownloadDocumentPDF.aspx?DocumentId=6871809