

**FORM  
INSP**

Rev  
X/20

**State of Colorado  
Energy and Carbon Management Commission**

1120 Lincoln Street, Suite 801, Denver, Colorado 80203  
Phone: (303) 894-2100 Fax: (303) 894-2109



Inspection Date:

01/06/2026

Submitted Date:

01/06/2026

Document Number:

713302424

**FIELD INSPECTION FORM**

Loc ID 332875 Inspector Name: Kester, Michael On-Site Inspection  2A Doc Num: \_\_\_\_\_

**Status Summary:**

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

**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

**Findings:**

- 9 Number of Comments
- 1 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        | 303-825-4822 | cogcc@kpk.com | <a href="#">all inspections</a> |

**Inspected Facilities:**

| Facility ID | Type | Status | Status Date | Well Class | API Num   | Facility Name | Insp Status |
|-------------|------|--------|-------------|------------|-----------|---------------|-------------|
| 247879      | WELL | PR     | 03/01/2019  | GW         | 123-15677 | OCOMA 31-25   | PR          |

**General Comment:**

[follow up well site inspection](#)

**Location**

Overall Good:

**Signs/Marker:**

|                    |               |       |  |
|--------------------|---------------|-------|--|
|                    | Type WELLHEAD |       |  |
|                    | Comment: good |       |  |
| Corrective Action: |               | Date: |  |

Emergency Contact Number:

|                    |  |       |  |
|--------------------|--|-------|--|
| Comment:           | <input style="width: 95%;" type="text"/> |       |  |
| Corrective Action: | <input style="width: 95%;" type="text"/> | Date: | <input style="width: 80%;" type="text"/> |

Overall Good:

**Spills:**

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

In Containment: No

Comment:

Multiple Spills and Releases?

**Equipment:**

|                           |  | #   |       | corrective date         |
|---------------------------|--|-----|-------|-------------------------|
| Type: Plunger Lift        |  | # 1 |       |                         |
| Comment:                  | disconnected   |     |       |                         |
| Corrective Action:        |  |     | Date: |                         |
| Type: Bradenhead          |  | # 1 |       |                         |
| Comment:                  | piped to surface   |     |       |                         |
| Corrective Action:        |  |     | Date: |                         |
| Type: Ancillary equipment |  | # 2 |       |                         |
| Comment:                  | automation   |     |       |                         |
| Corrective Action:        |  |     | Date: |                         |
| Type: Other               |  | # 1 |       |                         |
| Comment:                  | Master valve appears to be emitting emissions  |     |       |                         |
| Corrective Action:        | Securely fasten all valves, pipes, fittings, to ensure good mechanical condition, inspect at regular intervals and maintain in good mechanical condition per Rule 608.e. |     |       | Date: <u>08/27/2025</u> |

**Venting:**

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

**Flaring:**

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

**Inspected Facilities**

Facility ID: 247879 Type: WELL API Number: 123-15677 Status: PR Insp. Status: PR

**Idle Well**

Purpose:  Shut In  Temporarily Abandoned Reminder: EQUIPMENT ONSITE

Comment: Valves appeared to be closed at time of inspection

Corrective Action:  Date:

**BradenHead**

Date of Last Brhd Test: 08/20/2025 Annual Brhd Completed? Yes

Last Brhd Test Results Initial Surf Csg Pressure: 0 Fluid Type:

End Surf Csg Pressure: 0

Comment:

Corrective Action:  Date:

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

**ECMC Comments**

| Comment  | User    | Date       |
|--|---------|------------|
| <p>Inspector Michael Kester, did audit scout card and related documents conducted an follow up on-site inspection, doc 717701671, corrective actions appeared NOT to have been addressed<br/>                     Location: Ocoma 31-25<br/>                     Operator: KPK<br/>                     API#: 123-15677<br/>                     County: Weld<br/>                     While there, I observed well site,<br/>                     During this inspection the following possible compliance issues were observed:</p> <p>Master valve appears to be emitting emissions, maintain in good mechanical condition<br/>                     Rule 608.e. correction action date of 8/27/25 photo 2</p> <p>Weather conditions: sunny and dry<br/>                     A follow up on this site inspection needs to be conducted to ensure the Compliance issues have been corrected to comply with ECMC rules.<br/>                     This inspection does not nullify any orders or NOAV from the ECMC</p> | kesterm | 01/06/2026 |

**Attached Documents**

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

| Document Num | Description | URL   |
|--------------|-------------|---|
| 713302425    | site pic    | <a href="http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=7406828">http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=7406828</a> |