

**FORM
INSP**Rev
05/11**State of Colorado****Oil and Gas Conservation Commission**

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



DE	ET	OE	ES
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Inspection Date:

07/27/2012

Document Number:

663400666

Overall Inspection:

Satisfactory**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Tracking Type	Inspector Name: EDELEN, RANDY
	271733	332306		

Operator Information:

OGCC Operator Number: 47120 Name of Operator: KERR-MCGEE OIL & GAS ONSHORE LP

Address: P O BOX 173779

City: DENVER State: CO Zip: 80217-

Contact Information:

Contact Name	Phone	Email	Comment
Avant, Paul	(720) 929-6457	Paul.Avant@anadarko.com	Compliance Regulatory Analyst
Cocciolone, Ashley	(720) 929-6625	Ashley.Cocciolone@anadarko.com	Regulatory Supervisor
Kilcrease, Keith	(970) 506-5926	keith.kilcrease@anadarko.com	Production Superintendent

Compliance Summary:

QtrQtr: <u>NWNE</u>	Sec: <u>6</u>	Twp: <u>2N</u>	Range: <u>65W</u>				
Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Unsatisfactory	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
01/11/2006	200086870	PR	PR	S		P	N

Inspector Comment:

Producing wells See inspection 663400663 for detail on shared facilities

Related Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	
271733	WELL	PR	09/14/2010	OG	123-22118	BROWN 2-6	X
422503	WELL	PR	11/04/2011		123-33287	LEE 25-6X	X
422506	WELL	PR	11/30/2011	GW	123-33288	LEE 21-6	X
422509	WELL	PR	10/14/2011		123-33290	LEE 17-6	X
422515	WELL	PR	10/14/2011		123-33293	LEE 7-6	X
422518	WELL	PR	11/02/2011		123-33296	LEE 28-6	X

Equipment:Location Inventory

Special Purpose Pits: _____	Drilling Pits: _____	Wells: <u>6</u>	Production Pits: _____
Condensate Tanks: _____	Water Tanks: _____	Separators: _____	Electric Motors: _____
Gas or Diesel Motors: _____	Cavity Pumps: _____	LACT Unit: _____	Pump Jacks: _____
Electric Generators: _____	Gas Pipeline: _____	Oil Pipeline: _____	Water Pipeline: _____
Gas Compressors: _____	VOC Combustor: _____	Oil Tanks: _____	Dehydrator Units: _____
Multi-Well Pits: _____	Pigging Station: _____	Flare: _____	Fuel Tanks: _____

Location

Lease Road:				
Type	Satisfactory/Unsatisfactory	comment	Corrective Action	Date
Access	Satisfactory			

Signs/Marker:				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
WELLHEAD	Satisfactory	Brown 2-6Lee 28-6Lee 25-6XLee 21-6Lee 7-6Lee 17-6		

Emergency Contact Number: (S/U/V) Satisfactory Corrective Date: _____

Comment: _____

Corrective Action: _____

Spills:				
Type	Area	Volume	Corrective action	CA Date
<input type="checkbox"/> Multiple Spills and Releases?				

Fencing/:				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
WELLHEAD	Satisfactory	Brown 2-6Lee 28-6Lee 25-6XLee 21-6Lee 7-6Lee 17-6		

Equipment:					
Type	#	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
Flow Line	6	Satisfactory	Brown 2-6Lee 28-6Lee 25-6XLee 21-6Lee 7-6Lee 17-6		
Plunger Lift	6	Satisfactory	Brown 2-6Lee 28-6Lee 25-6XLee 21-6Lee 7-6Lee 17-6		

Venting:		
Yes/No	Comment	
NO		

Flaring:				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date

Predrill

Location ID: 332306

Site Preparation:

Lease Road Adeq.: _____

Pads: _____

Soil Stockpile: _____

Corrective Action: _____

Date: _____ CDP Num.: _____

Form 2A COAs:**Comment:** _____**CA:** _____**Date:** _____**Wildlife BMPs:****Comment:** _____**CA:** _____**Date:** _____**Stormwater:**

Erosion BMPs

Present

Other BMPs

Present

Corrective Action: _____ Date: _____

Comments: Erosion BMPs: _____

Other BMPs: _____

Comment: _____**Staking:****On Site Inspection (305):**Surface Owner Contact Information:

Name: _____

Address: _____

Phone Number: _____

Cell Phone: _____

Operator Rep. Contact Information:

Landman Name: _____

Phone Number: _____

Date Onsite Request Received: _____

Date of Rule 306 Consultation: _____

Request LGD Attendance: _____

LGD Contact Information:

Name: _____ Phone Number: _____ Agreed to Attend: _____

Summary of Landowner Issues:Summary of Operator Response to Landowner Issues:Onsite Inspection Memorandum Summarizing Discussions at Inspection as Attachment:**Facility**

Facility ID: 271733 Type: WELL API Number: 123-22118 Status: PR Insp. Status: PR

Facility ID: 422503 Type: WELL API Number: 123-33287 Status: PR Insp. Status: PR

Facility ID: 422506 Type: WELL API Number: 123-33288 Status: PR Insp. Status: PR

Inspector Name: EDELEN, RANDY

Facility ID: 422509 Type: WELL API Number: 123-33290 Status: PR Insp. Status: PR

Facility ID: 422515 Type: WELL API Number: 123-33293 Status: PR Insp. Status: PR

Facility ID: 422518 Type: WELL API Number: 123-33296 Status: PR Insp. Status: PR

Producing Well

Comment:

Environmental

Spills/Releases:

Type of Spill: Description: Estimated Spill Volume:

Comment:

Corrective Action: Date:

Reportable: GPS: Lat Long

Proximity to Surface Water: Depth to Ground Water:

Water Well:

DWR Receipt Num: Owner Name: GPS : Lat Long

Field Parameters:

Sample Location:

Emission Control Burner (ECB):

Comment:

Pilot: Wildlife Protection Devices (fired vessels):

Reclamation - Storm Water - Pit

Interim Reclamation:

Date Interim Reclamation Started: Date Interim Reclamation Completed:

Land Use: RANGELAND

Comment:

1003a. Debris removed? Pass CM

CA CA Date

Waste Material Onsite? Pass CM

CA CA Date

Unused or unneeded equipment onsite? CM

CA CA Date

Pit, cellars, rat holes and other bores closed? Pass CM

CA CA Date

Guy line anchors removed? Pass CM

CA CA Date

Guy line anchors marked? CM

CA CA Date

1003b. Area no longer in use? In Production areas stabilized ? Pass1003c. Compacted areas have been cross ripped? Pass1003d. Drilling pit closed? Pass Subsidence over on drill pit? Pass

Cuttings management: _____

1003e. Areas no longer needed for drilling or subsequent operations for have been re-vegetated to 80% of pre-existing? InProduction areas have been stabilized? Pass Segregated soils have been replaced? Pass**RESTORATION AND REVEGETATION**Cropland

Top soil replaced _____ Recontoured _____ Perennial forage re-established _____

Non-CroplandTop soil replaced Pass Recontoured Pass 80% Revegetation In1003 f. Weeds Noxious weeds? P

Comment: _____

Overall Interim Reclamation In Process**Final Reclamation/ Abandoned Location:**

Date Final Reclamation Started: _____ Date Final Reclamation Completed: _____

Final Land Use: RANGELAND

Reminder: _____

Comment: _____

Well plugged _____ Pit mouse/rat holes, cellars backfilled _____

Debris removed _____ No disturbance /Location never built _____

Access Roads Regraded _____ Contoured _____ Culverts removed _____

Gravel removed _____

Location and associated production facilities reclaimed _____ Locations, facilities, roads, recontoured _____

Compaction alleviation _____ Dust and erosion control _____

Non cropland: Revegetated 80% _____ Cropland: perennial forage _____

Weeds present _____ Subsidence _____

Comment: _____

Corrective Action: _____ Date _____

Overall Final Reclamation

Storm Water:

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

S/U/V: Satisfactory Corrective Date: _____

Comment: _____

CA: _____