

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:
01/16/2013

Document Number:
667601062

Overall Inspection:
Satisfactory

FIELD INSPECTION FORM

Location Identifier	Facility ID	Loc ID	Tracking Type	Inspector Name:
	<u>416335</u>	<u>302913</u>		<u>HICKEY, MIKE</u>

Operator Information:

OGCC Operator Number:	<u>47120</u>	Name of Operator:	<u>KERR-MCGEE OIL & GAS ONSHORE LP</u>
Address:	<u>P O BOX 173779</u>		
City:	<u>DENVER</u>	State:	<u>CO</u>
		Zip:	<u>80217-</u>

Contact Information:

Contact Name	Phone	Email	Comment
Cocciolone, Ashley	720-929-6625	Ashley.Cocciolone@anadarko.com	
Avant, Paul	720-929-6457	Paul.Avant@anadarko.com	

Compliance Summary:

QtrQtr:	<u>NWSW</u>	Sec:	<u>3</u>	Twp:	<u>1N</u>	Range:	<u>68W</u>
Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Unsatisfactory	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
12/14/2012	667601008	PR	PR	S			N
05/19/2010	200251401	CO	DG	S			N

Inspector Comment:

Plugging observation at API #05-123-31342, Kerr-Mcgee #10-3. Casing is dug out to cut and cap. Wells immediately adjacent are shut in and tagged/locked out. Backhoe on site. Excavation is shored and fenced.

Related Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	
301377	WELL	IJ	12/12/2012	DSPW	123-30012	KERR-MCGEE 19-3i	X
416335	WELL	PR	12/15/2010	OW	123-31342	KERR-MCGEE 10-3	X
416373	WELL	PR	12/15/2010	OW	123-31352	KERR-MCGEE 19-3	X
416377	WELL	PR	12/15/2010	OW	123-31354	KERR-MCGEE 11-3	X
416380	WELL	PR	12/14/2010	OW	123-31355	KERR-MCGEE 35-3	X
416397	WELL	PR	12/14/2010	OW	123-31360	KERR-MCGEE 33-3	X
416406	WELL	PR	12/15/2010	OW	123-31363	KERR-MCGEE 22-3	X
416415	WELL	PR	12/14/2010	OW	123-31365	KERR-MCGEE 12-3	X
416416	WELL	PR	12/14/2010	OW	123-31366	KERR-MCGEE 15-3	X
416417	WELL	PR	12/10/2010	OW	123-31367	KERR-MCGEE 23-3	X
416423	WELL	PR	12/14/2010	OW	123-31369	KERR-MCGEE 13-3	X
416549	WELL	PR	12/14/2010	OW	123-31406	KERR-MCGEE 14-3	X

Equipment:

Location Inventory

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Special Purpose Pits: _____	Drilling Pits: _____	Wells: <u>12</u>	Production Pits: _____
Condensate Tanks: _____	Water Tanks: _____	Separators: _____	Electric Motors: _____
Gas or Diesel Mortors: _____	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

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

Comment: _____

Corrective Action: _____

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

Venting:	
Yes/No	Comment

Flaring:				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date

Predrill

Location ID: 302913

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: 301377 Type: WELL API Number: 123-30012 Status: IJ Insp. Status: AC

Underground Injection Control

UIC Violation: _____ Maximum Injection Pressure: _____

UIC Routine

Inj./Tube: Pressure or inches of Hg _____ Previous Test Pressure _____ MPP _____
 (e.g. 30 psig or -30" Hg) Inj Zone: FNTN

TC: Pressure or inches of Hg _____ Previous Test Pressure _____ Last MIT: 04/10/2012

Brhd: Pressure or inches of Hg _____ Previous Test Pressure _____ AnnMTReq: _____

Comment: _____

Method of Injection: GRAVITY FEED

Test Type: _____ Tbg psi: _____ Csg psi: _____ BH psi: _____

Insp. Status: _____

Comment: _____

Facility ID: 416335 Type: WELL API Number: 123-31342 Status: PR Insp. Status: PR

Producing Well

Comment: _____

Facility ID: 416373 Type: WELL API Number: 123-31352 Status: PR Insp. Status: PR

Facility ID: 416377 Type: WELL API Number: 123-31354 Status: PR Insp. Status: PR

Producing Well

Comment: _____

Facility ID: 416380 Type: WELL API Number: 123-31355 Status: PR Insp. Status: PR

Producing Well

Comment: _____

Facility ID: 416397 Type: WELL API Number: 123-31360 Status: PR Insp. Status: PR

Producing Well

Comment: _____

Facility ID: 416406 Type: WELL API Number: 123-31363 Status: PR Insp. Status: PR

Producing Well

Comment: _____

Facility ID: 416415 Type: WELL API Number: 123-31365 Status: PR Insp. Status: PR

Producing Well

Comment: _____

Facility ID: 416416 Type: WELL API Number: 123-31366 Status: PR Insp. Status: PR

Producing Well

Comment: _____

Facility ID: 416417 Type: WELL API Number: 123-31367 Status: PR Insp. Status: PR

Producing Well

Comment:

Facility ID: 416423 Type: WELL API Number: 123-31369 Status: PR Insp. Status: PR

Producing Well

Comment:

Facility ID: 416549 Type: WELL API Number: 123-31406 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:

Lat _____ Long _____

DWR Receipt Num: _____ Owner Name: _____ GPS : _____

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: DRY LAND

Comment:

1003a. Debris removed? _____ CM _____

CA _____ CA Date _____

Waste Material Onsite? _____ CM _____

CA _____ CA Date _____

Unused or unneeded equipment onsite? _____ CM _____

CA _____ CA Date _____

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

CA _____ CA Date _____

Guy line anchors removed? _____ CM _____

CA _____ CA Date _____

Guy line anchors marked? _____ CM _____

CA _____ CA Date _____

1003b. Area no longer in use? _____ Production areas stabilized ? _____

1003c. Compacted areas have been cross ripped? _____

1003d. Drilling pit closed? _____ Subsidence over on drill pit? _____

Cuttings management: _____

1003e. Areas no longer needed for drilling or subsequent operations for have been re-vegetated to 80% of pre-existing? _____

Production areas have been stabilized? _____ Segregated soils have been replaced? _____

RESTORATION AND REVEGETATION

Cropland

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

Non-Cropland

Top soil replaced _____ Recontoured _____ 80% Revegetation _____

1003 f. Weeds Noxious weeds? _____

Comment: _____

Overall Interim Reclamation _____

Final Reclamation/ Abandoned Location:

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

Final Land Use: DRY LAND _____

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 _____ Multi-Well Location

Storm Water:

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

S/U/V: _____ Corrective Date: _____

Comment: _____

CA: _____

