

**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



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Inspection Date:

01/22/2013

Document Number:

667601072

Overall Inspection:

Unsatisfactory**FIELD INSPECTION FORM**

Location Identifier: 241904 Facility ID: 336149 Loc ID: Tracking Type: Inspector Name: HICKEY, MIKE

Operator Information:OGCC Operator Number: 46290 Name of Operator: K P KAUFFMAN COMPANY INCAddress: 1675 BROADWAY, STE 2800City: DENVER State: CO Zip: 80202**Contact Information:**

Contact Name	Phone	Email	Comment
Lara-Mesa, Susana	303-825-4822	slaramesa@kpk.com	Eng'g Project Mgr

Compliance Summary:

QtrQtr: <u>NENE</u>	Sec: <u>25</u>	Twp: <u>2N</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)
02/02/2008	200201380	PR	PR	U			
06/17/2002	200027599	ID	TA	U		F	Y
10/16/1996	500164663	PR	SI				
02/06/1996	500164662	ID	TA			F	Y

Inspector Comment:

Follow up inspection of API #05-123-09695, Firestone C #1. Previous unsatisfactory inspection identified production records ascribed to this well when there was no pump on the well. The pump jack assembled on this well is not functional with the head of the pump jack disconnected. Production records show only gas. If the pump jack is unused equipment, it should be removed.

Related Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	
241902	WELL	PR	07/14/1979	OW	123-09693	FIRESTONE 'A' 1	X
241903	WELL	PR	06/10/1979	OW	123-09694	FIRESTONE 'B' 1	X
241904	WELL	PR	09/08/1979	OW	123-09695	FIRESTONE 'C' 1	X
241905	WELL	PR	07/05/1979	OW	123-09696	FIRESTONE 'D' 1	X
248776	WELL	PR	02/17/1993	GW	123-16578	FIRESTONE 12-30	

Equipment:Location Inventory

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

Location

Inspector Name: HICKEY, MIKE

Signs/Marker:				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
WELLHEAD	Unsatisfactory	Signs are not legible.	Replace signs.	04/01/2013

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

Comment: _____

Corrective Action: _____

Good Housekeeping:				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
UNUSED EQUIPMENT	Unsatisfactory			

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	Unsatisfactory	Fence repair is required	Repair fence.	04/01/2013

Equipment:					
Type	#	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
Pump Jack	4	Unsatisfactory		Remove unused pump jack.	04/01/2013

Facilities: <input type="checkbox"/> New Tank Tank ID: _____					
Contents	#	Capacity	Type	SE GPS	
CRUDE OIL					
S/U/V:	Comment: No tanks on site.				
Corrective Action:					Corrective Date:

Paint					
Condition					
Other (Content)					
Other (Capacity)					
Other (Type)					

Berms					
Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance	
Corrective Action					Corrective Date
Comment					

Venting:	
Yes/No	Comment

Flaring:				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date

Predrill

Location ID: 336149

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: 241902 Type: WELL API Number: 123-09693 Status: PR Insp. Status: PR

Inspector Name: HICKEY, MIKE

Facility ID: 241903 Type: WELL API Number: 123-09694 Status: PR Insp. Status: PR

Producing Well

Comment:

Facility ID: 241904 Type: WELL API Number: 123-09695 Status: PR Insp. Status: PR

Producing Well

Comment:

Facility ID: 241905 Type: WELL API Number: 123-09696 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:

Comment:

1003a. Debris removed? Pass CM

CA CA Date

Waste Material Onsite? Pass CM

CA CA Date

Unused or unneeded equipment onsite? Fail CM

CA Remove unused equipment. CA Date 04/01/2013

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

CA CA Date

Inspector Name: HICKEY, MIKE

Guy line anchors removed? _____ CM _____
CA _____ CA Date _____
Guy line anchors marked? _____ CM _____
CA _____ CA Date _____

1003b. Area no longer in use? Pass Production areas stabilized ? Pass
1003c. Compacted areas have been cross ripped? Pass
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? Pass
Production areas have been stabilized? Pass Segregated soils have been replaced? Pass

RESTORATION AND REVEGETATION

Cropland

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

Non-Cropland

Top soil replaced Pass Recontoured Pass 80% Revegetation Pass

1003 f. Weeds Noxious weeds? P

Comment: _____

Overall Interim Reclamation Pass

Final Reclamation/ Abandoned Location:

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

Final Land Use: _____

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

Inspector Name: HICKEY, MIKE

S/U/V: _____ Corrective Date: _____

Comment: _____

CA: _____

COGCC Comments

Comment	User	Date
Contact COGCC to provide locations of tank batteries.	HickeyMi	01/22/2013