

**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 |
|----|----|----|----|

Inspection Date:

04/09/2014

Document Number:

668301167

Overall Inspection:

Satisfactory**FIELD INSPECTION FORM**

|                     |             |        |                  |  |
|---------------------|-------------|--------|------------------|--|
| Location Identifier | Facility ID | Loc ID | Inspector Name:  | On-Site Inspection                         |
|                     | 256463      | 336422 | JOHNSON, RANDELL | <input type="checkbox"/> 2A Doc Num: _____ |

**Operator Information:**

OGCC Operator Number:

Name of Operator: KERR-MCGEE OIL & GAS ONSHORE LPAddress: P O BOX 173779City: DENVER State: CO Zip: 80217-

- ☐ THIS IS A FOLLOW UP INSPECTION
- ☐ FOLLOW UP INSPECTION REQUIRED
- ☐ NO FOLLOW UP INSPECTION REQUIRED
- ☐ INSPECTOR REQUESTS FORM 42 WHEN CORRECTIVE ACTIONS ARE COMPLETED

**Contact Information:**

| Contact Name       | Phone                             | Email                          | Comment                    |
|--------------------|-----------------------------------|--------------------------------|----------------------------|
| Kilcrease, Keith   | 970-506-5926                      | keith.kilcrease@anadarko.com   | Production Superintendent  |
| Cocciolone, Ashley | 720-929-6625                      | ashley.cocciolone@anadarko.com | Regulatory Supervisor      |
| Avant, Paul        | O:720-929-6457,<br>C:720-273-2688 | paul.avant@anadarko.com        | Rockies Regulatory Affairs |

**Compliance Summary:**QtrQtr: NENW Sec: 3 Twp: 2N Range: 67W

| Insp. Date | Doc Num   | Insp. Type | Insp Status | Satisfactory /Unsatisfactory | PA P/F/I | Pas/Fail (P/F) | Violation (Y/N) |
|------------|-----------|------------|-------------|------------------------------|----------|----------------|-----------------|
| 04/29/2008 | 200198142 | PR         | PR          | Satisfactory                 |          |                | No              |

**Inspector Comment:****Related Facilities:**

| Facility ID | Type | Status | Status Date | Well Class | API Num   | Facility Name    | Insp Status |
|-------------|------|--------|-------------|------------|-----------|------------------|-------------|
| 249095      | WELL | PR     | 06/18/1993  | OW         | 123-16897 | ASBURY V 3-3     | PR          |
| 256463      | WELL | PR     | 04/28/2000  | GW         | 123-19875 | HSR-KNIFFEN 3-3A | SI          |

**Equipment:**Location Inventory

|                              |                        |                     |                         |
|------------------------------|------------------------|---------------------|-------------------------|
| Special Purpose Pits: _____  | Drilling Pits: _____   | Wells: _____        | 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**

| <b>Signs/Marker:</b> |                             |         |                   |         |
|----------------------|-----------------------------|---------|-------------------|---------|
| Type                 | Satisfactory/Unsatisfactory | Comment | Corrective Action | CA Date |
| WELLHEAD             | Satisfactory                |         |                   |         |
| BATTERY              | Satisfactory                |         |                   |         |
| TANK LABELS/PLACARDS | Satisfactory                |         |                   |         |

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

Comment: \_\_\_\_\_

Corrective Action: \_\_\_\_\_

**Spills:**

| Type | Area | Volume | Corrective action | CA Date |
|------|------|--------|-------------------|---------|
|------|------|--------|-------------------|---------|

☐ Multiple Spills and Releases?

| <b>Fencing/:</b> |                             |                      |                   |         |
|------------------|-----------------------------|----------------------|-------------------|---------|
| Type             | Satisfactory/Unsatisfactory | Comment              | Corrective Action | CA Date |
| LOCATION         | Satisfactory                | Barbed wire fencing  |                   |         |
| WELLHEAD         | Satisfactory                | Pipe and rod fencing |                   |         |

| <b>Equipment:</b>           |   |                             |   |                   |         |
|-----------------------------|---|-----------------------------|---|-------------------|---------|
| Type                        | # | Satisfactory/Unsatisfactory | Comment                                     | Corrective Action | CA Date |
| Horizontal Heated Separator | 1 | Satisfactory                |   |                   |         |
| Gas Meter Run               | 1 | Satisfactory                | Pipeline meter                              |                   |         |
| Gas Meter Run               | 1 | Satisfactory                | Operator check meter on outlet of separator |                   |         |
| Plunger Lift                | 1 | Satisfactory                |   |                   |         |

**Facilities:** ☐ New Tank Tank ID: \_\_\_\_\_

| Contents  | # | Capacity | Type      | SE GPS                |
|-----------|---|----------|-----------|-----------------------|
| CRUDE OIL | 1 | 300 BBLS | STEEL AST | 40.169250,-104.881280 |

S/U/V: Satisfactory Comment: \_\_\_\_\_

Corrective Action: \_\_\_\_\_ Corrective Date: \_\_\_\_\_

**Paint**

| Condition | Adequate |
|-----------|----------|
|-----------|----------|

Other (Content) \_\_\_\_\_

Other (Capacity) \_\_\_\_\_

Other (Type) \_\_\_\_\_

**Berms**

| Type  | Capacity | Permeability (Wall) | Permeability (Base) | Maintenance |
|-------|----------|---------------------|---------------------|-------------|
| Earth | Adequate | Walls Sufficient    | Base Sufficient     | Adequate    |

Corrective Action: \_\_\_\_\_ Corrective Date: \_\_\_\_\_

Comment: \_\_\_\_\_

|                        |                             |                                   |                     |                       |  |
|------------------------|-----------------------------|-----------------------------------|---------------------|-----------------------|--|
| <b>Facilities:</b>     |                             | <input type="checkbox"/> New Tank |                     | Tank ID: _____        |  |
| Contents               | #                           | Capacity                          | Type                | SE GPS                |  |
| PRODUCED WATER         | 1                           | <100 BBLs                         | PBV FIBERGLASS      | 40.169250,-104.881280 |  |
| S/U/V:                 | Satisfactory                |                                   | Comment: 75 bbls    |                       |  |
| Corrective Action:     |                             |                                   |                     | Corrective Date:      |  |
| <b>Paint</b>           |                             |                                   |                     |                       |  |
| Condition              | Adequate                    |                                   |                     |                       |  |
| Other (Content) _____  |                             |                                   |                     |                       |  |
| Other (Capacity) _____ |                             |                                   |                     |                       |  |
| Other (Type) _____     |                             |                                   |                     |                       |  |
| <b>Berms</b>           |                             |                                   |                     |                       |  |
| Type                   | Capacity                    | Permeability (Wall)               | Permeability (Base) | Maintenance           |  |
| Earth                  | Adequate                    | Walls Sufficient                  | Base Sufficient     | Adequate              |  |
| Corrective Action      |                             |                                   |                     | Corrective Date       |  |
| Comment                |                             |                                   |                     |                       |  |
| <b>Venting:</b>        |                             |                                   |                     |                       |  |
| Yes/No                 |                             | Comment                           |                     |                       |  |
| NO                     |                             |                                   |                     |                       |  |
| <b>Flaring:</b>        |                             |                                   |                     |                       |  |
| Type                   | Satisfactory/Unsatisfactory | Comment                           | Corrective Action   | CA Date               |  |
|                        |                             |                                   |                     |                       |  |

**Predrill**

Location ID: 256463

**Site Preparation:**

Lease Road Adeq.: \_\_\_\_\_ Pads: \_\_\_\_\_ Soil Stockpile: \_\_\_\_\_

**S/U/V:** \_\_\_\_\_

Corrective Action: \_\_\_\_\_ Date: \_\_\_\_\_ CDP Num.: \_\_\_\_\_

**Form 2A COAs:****S/U/V:** \_\_\_\_\_ **Comment:** \_\_\_\_\_**CA:** \_\_\_\_\_ **Date:** \_\_\_\_\_**Wildlife BMPs:****S/U/V:** \_\_\_\_\_ **Comment:** \_\_\_\_\_**CA:** \_\_\_\_\_ **Date:** \_\_\_\_\_**Stormwater:****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: 256463 Type: WELL API Number: 123-19875 Status: PR Insp. Status: SI

**Idle Well**Purpose: ☒ Shut In ☐ Temporarily Abandoned Reminder: \_\_\_\_\_

S/V: \_\_\_\_\_ CA Date: \_\_\_\_\_

CA: \_\_\_\_\_

Comment: Producing intermittently

**Environmental****Spills/Releases:**

Type of Spill: \_\_\_\_\_ Description: \_\_\_\_\_ Estimated Spill Volume: \_\_\_\_\_

Inspector Name: JOHNSON, RANDELL

|   |                |  |             |
|---|----------------|--|-------------|
| Comment: <input style="width: 700px;" type="text"/>         |                |  |             |
| Corrective Action: _____                                    |                | Date: _____  |             |
| Reportable: _____   | GPS: Lat _____ | Long _____   |             |
| Proximity to Surface Water: _____                           |                | Depth to Ground Water: _____                       |             |
| <b>Water Well:</b>  |                |  |             |
| DWR Receipt Num: _____                                      |                | Owner Name: _____                                  | GPS : _____ |
| <b>Field Parameters:</b>                                    |                |  |             |
| <input style="width: 300px;" type="text"/>                  |                |  |             |
| Sample Location: <input style="width: 400px;" type="text"/> |                |  |             |
| 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: <input style="width: 750px;" type="text"/>  |   |
| 1003a. Debris removed? <u>Pass</u> CM _____  |   |
| CA _____   | CA Date _____                             |
| Waste Material Onsite? <u>Pass</u> CM _____  |   |
| CA _____   | CA Date _____                             |
| Unused or unneeded equipment onsite? <u>Pass</u> CM _____  |   |
| CA _____   | CA Date _____                             |
| Pit, cellars, rat holes and other bores closed? <u>Pass</u> CM _____   |   |
| CA _____   | CA Date _____                             |
| Guy line anchors removed? <u>Pass</u> CM _____   |   |
| CA _____   | CA Date _____                             |
| Guy line anchors marked? _____ CM _____  |   |
| CA _____   | CA Date _____                             |
| 1003b. Area no longer in use? <u>Pass</u>  |   |
| Production areas stabilized ? <u>Pass</u>  |   |
| 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? <u>Pass</u> |   |
| Production areas have been stabilized? <u>Pass</u>   |   |
| Segregated soils have been replaced? _____   |   |

**RESTORATION AND REVEGETATION**

Cropland

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

Inspector Name: JOHNSON, RANDELL

Non-Cropland

Top soil replaced \_\_\_\_\_

Recontoured \_\_\_\_\_

80% Revegetation \_\_\_\_\_

1003 f. Weeds Noxious weeds? \_\_\_\_\_

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 \_\_\_\_\_

Well Release on Active Location ☐

Multi-Well Location ☐

**Storm Water:**

| Loc Erosion BMPs | BMP Maintenance | Lease Road Erosion BMPs | Lease BMP Maintenance | Chemical BMPs | Chemical BMP Maintenance | Comment    |
|------------------|-----------------|-------------------------|-----------------------|---------------|--------------------------|------------|
| Other            | Pass            | Other                   | Pass                  |               |                          | Vegetation |
| Gravel           | Pass            | Gravel                  | Pass                  |               |                          |            |
| Compaction       | Pass            | Compaction              | Pass                  |               |                          |            |

S/U/V: Satisfactory Corrective Date: \_\_\_\_\_

Comment: \_\_\_\_\_

CA: \_\_\_\_\_

Pits: ☒ NO SURFACE INDICATION OF PIT