

**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:

05/13/2014

Document Number:

671101396

Overall Inspection:

SATISFACTORY**FIELD INSPECTION FORM**

| | | | | | |
|---------------------|-------------|--------|-----------------|--------------------------|-------------|
| Location Identifier | Facility ID | Loc ID | Inspector Name: | On-Site Inspection | 2A Doc Num: |
| | 432228 | 432232 | MONTOYA, JOHN | <input type="checkbox"/> | |

Operator Information:OGCC Operator Number: 47120Name 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 |
|--------------------|--------------|--------------------------------|-----------------------|
| Cocciolone, Ashley | 720-929-6625 | ashley.Cocciolone@anadarko.com | regulatory supervisor |
| Avant, Paul | 720-929-6475 | Paul.Avant@anadarko.com | regulatory |

Compliance Summary:QtrQtr: NENW Sec: 8 Twp: 2N Range: 66W**Inspector Comment:****Related Facilities:**

| Facility ID | Type | Status | Status Date | Well Class | API Num | Facility Name | Insp Status | |
|-------------|------|--------|-------------|------------|-----------|--------------------------|-------------|-------------------------------------|
| 432227 | WELL | PR | 01/28/2014 | OW | 123-37025 | KUNZMAN FEDERAL 13N-8HZ | PR | <input checked="" type="checkbox"/> |
| 432228 | WELL | DA | 11/15/2013 | | 123-37026 | KUNZMAN FEDERAL 30N-5HZ | DA | <input type="checkbox"/> |
| 432229 | WELL | PR | 01/20/2014 | OW | 123-37027 | KUNZMAN 29N-5HZ | PR | <input checked="" type="checkbox"/> |
| 432230 | WELL | PR | 01/22/2014 | OW | 123-37028 | KUNZMAN 4N-5HZ | PR | <input checked="" type="checkbox"/> |
| 432231 | WELL | AL | 06/21/2013 | LO | 123-37029 | KUNZMAN 3N-5HZ | AL | <input type="checkbox"/> |
| 432233 | WELL | PR | 02/28/2014 | OW | 123-37030 | KUNZMAN FEDERAL 35N-8HZ | PR | <input checked="" type="checkbox"/> |
| 432234 | WELL | PR | 01/28/2014 | OW | 123-37031 | KUNZMAN 14N-8HZ | PR | <input checked="" type="checkbox"/> |
| 432236 | WELL | PR | 01/20/2014 | OW | 123-37032 | KUNZMAN FEDERAL 30N-5HZR | PR | <input checked="" type="checkbox"/> |
| 432237 | WELL | PR | 01/28/2014 | OW | 123-37033 | KUNZMAN FEDERAL 13C-8HZ | PR | <input checked="" type="checkbox"/> |
| 432238 | WELL | PR | 01/22/2014 | OW | 123-37034 | KUNZMAN 3C-5HZ | PR | <input checked="" type="checkbox"/> |
| 432239 | WELL | AL | 06/10/2013 | LO | 123-37035 | KUNZMAN 14C-8HZ | AL | <input type="checkbox"/> |

Equipment:Location Inventory

Inspector Name: MONTOYA, JOHN

| | | | |
|------------------------------|-------------------------|---------------------|-------------------------|
| Special Purpose Pits: _____ | Drilling Pits: <u>2</u> | Wells: <u>11</u> | Production Pits: _____ |
| Condensate Tanks: _____ | Water Tanks: _____ | Separators: _____ | Electric Motors: _____ |
| Gas or Diesel Mortors: _____ | Cavity Pumps: _____ | LACT Unit: _____ | Pump Jacks: <u>11</u> |
| 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

Signs/Marker:

| Type | Satisfactory/Action Required | Comment | Corrective Action | CA Date |
|----------------------|------------------------------|---------|-------------------|---------|
| TANK LABELS/PLACARDS | SATISFACTORY | | | |
| BATTERY | SATISFACTORY | | | |
| WELLHEAD | SATISFACTORY | | | |
| CONTAINERS | SATISFACTORY | | | |

Emergency Contact Number (S/A/V): SATISFACTORY

Corrective Date: _____

Comment: _____

Corrective Action: _____

Spills:

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

☐ Multiple Spills and Releases?

Fencing/:

| Type | Satisfactory/Action Required | Comment | Corrective Action | CA Date |
|--------------------|------------------------------|---------|-------------------|---------|
| TANK BATTERY | SATISFACTORY | | | |
| IGNITOR/COMBUST OR | SATISFACTORY | | | |
| SEPARATOR | SATISFACTORY | | | |
| WELLHEAD | SATISFACTORY | | | |

Equipment:

| Type | # | Satisfactory/Action Required | Comment | Corrective Action | CA Date |
|-----------------------------|----|------------------------------|--------------------------|-------------------|---------|
| VRU | 2 | SATISFACTORY | | | |
| Horizontal Heated Separator | 9 | SATISFACTORY | | | |
| Emission Control Device | 4 | SATISFACTORY | | | |
| Vertical Separator | 2 | SATISFACTORY | | | |
| Compressor | 3 | SATISFACTORY | | | |
| Ancillary equipment | 4 | SATISFACTORY | CHEMICAL INJECTION PUMPS | | |
| Gas Meter Run | 12 | SATISFACTORY | | | |
| Bird Protectors | 13 | SATISFACTORY | | | |

Inspector Name: MONTOYA, JOHN

| | | | | | |
|--------------|---|--------------|--|--|--|
| Plunger Lift | 8 | SATISFACTORY | | | |
|--------------|---|--------------|--|--|--|

Facilities: ☐ New Tank Tank ID: _____

| Contents | # | Capacity | Type | SE GPS |
|----------------|---|----------|----------------|--------|
| PRODUCED WATER | 2 | 200 BBLS | PBV FIBERGLASS | , |

| | |
|---------------------|----------|
| S/A/V: SATISFACTORY | Comment: |
|---------------------|----------|

| | | | |
|--------------------|--|------------------|--|
| Corrective Action: | | Corrective Date: | |
|--------------------|--|------------------|--|

Paint

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

Other (Content) _____

Other (Capacity) _____

Other (Type) _____

Berms

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

| | | | |
|-------------------|--|-----------------|--|
| Corrective Action | | Corrective Date | |
|-------------------|--|-----------------|--|

| | |
|---------|--|
| Comment | |
|---------|--|

Facilities: ☐ New Tank Tank ID: _____

| Contents | # | Capacity | Type | SE GPS |
|-----------|---|----------|-----------|-----------------------|
| CRUDE OIL | 6 | 300 BBLS | STEEL AST | 40.162840,-104.802380 |

| | |
|---------------------|----------|
| S/A/V: SATISFACTORY | Comment: |
|---------------------|----------|

| | | | |
|--------------------|--|------------------|--|
| Corrective Action: | | Corrective Date: | |
|--------------------|--|------------------|--|

Paint

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

Other (Content) _____

Other (Capacity) _____

Other (Type) _____

Berms

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

| | | | |
|-------------------|--|-----------------|--|
| Corrective Action | | Corrective Date | |
|-------------------|--|-----------------|--|

| | |
|---------|--|
| Comment | |
|---------|--|

| | |
|-----------------|---------|
| Venting: | |
| Yes/No | Comment |
| NO | |

| | | | | |
|-------------------|------------------------------|---------|-------------------|---------|
| Flaring: | | | | |
| Type | Satisfactory/Action Required | Comment | Corrective Action | CA Date |
| Ignitor/Combustor | SATISFACTORY | | | |

Predrill

Location ID: 432228

Site Preparation:

Lease Road Adeq.: _____

Pads: _____

Soil Stockpile: _____

S/A/V: _____

Corrective Action: _____

Date: _____ CDP Num.: _____

Form 2A COAs:**S/A/V:** _____ **Comment:** _____**CA:** _____ **Date:** _____**Wildlife BMPs:****S/A/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: 432227 Type: WELL API Number: 123-37025 Status: PR Insp. Status: PR

Producing Well

Comment: PR

Facility ID: 432229 Type: WELL API Number: 123-37027 Status: PR Insp. Status: PR

Producing Well

Comment: PR

Facility ID: 432230 Type: WELL API Number: 123-37028 Status: PR Insp. Status: PR

Producing Well

Comment: PR

Facility ID: 432233 Type: WELL API Number: 123-37030 Status: PR Insp. Status: PR

Producing WellComment: PR

Facility ID: 432234 Type: WELL API Number: 123-37031 Status: PR Insp. Status: PR

Producing WellComment: PR

Facility ID: 432236 Type: WELL API Number: 123-37032 Status: PR Insp. Status: PR

Producing WellComment: PR

Facility ID: 432237 Type: WELL API Number: 123-37033 Status: PR Insp. Status: PR

Producing WellComment:

Facility ID: 432238 Type: WELL API Number: 123-37034 Status: PR Insp. Status: PR

Producing WellComment: PR**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: IRRIGATEDComment: THERE ARE 4 WELLS ON THIS PAD AND 4 MORE ON OTHER PAD ALL IN IRRIGATED LAND

1003a. Debris removed? Pass CM _____
 CA _____ CA Date _____
 Waste Material Onsite? Pass CM _____
 CA _____ CA Date _____
 Unused or unneeded equipment onsite? Pass 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? Pass Production areas stabilized ? Pass

1003c. Compacted areas have been cross ripped? _____

1003d. 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? Pass

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

RESTORATION AND REVEGETATION

Cropland

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

Non-Cropland

Top soil replaced _____ Recontoured _____ 80% Revegetation _____

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: IRRIGATED

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: _____

Inspector Name: MONTOYA, JOHN

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 |
|------------------|-----------------|-------------------------|-----------------------|---------------|--------------------------|---------|
| Gravel | Pass | Culverts | Pass | | | |

S/A/V: SATISFACTOR Y Corrective Date: _____

Comment: _____

CA: _____

Pits: ☐ NO SURFACE INDICATION OF PIT

COGCC Comments

| Comment | User | Date |
|--|----------|------------|
| 8 500BBL FRAC TANKS ON LOCATION FOR WATER PROD | montoyaj | 05/13/2014 |