

**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:  
12/11/2014Document Number:  
671103168Overall Inspection:  
SATISFACTORY**FIELD INSPECTION FORM**

|                     |             |        |                 |                          |             |
|---------------------|-------------|--------|-----------------|--------------------------|-------------|
| Location Identifier | Facility ID | Loc ID | Inspector Name: | On-Site Inspection       | 2A Doc Num: |
|                     | 417020      | 319410 | MONTOYA, JOHN   | <input type="checkbox"/> |             |

**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-

- ☐ 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               |
|--------------------|--------------|--------------------------------|-----------------------|
| ,                  |              | COGCCInspections@andarko.com   | All Inspections       |
| Helgeland, Gary    |              | gary.helgeland@state.co.us     |                       |
| Avant, Paul        | 720-929-6475 | Paul.Avant@anadarko.com        | regulatory            |
| Cocciolone, Ashley | 720-929-6625 | ashley.Cocciolone@anadarko.com | regulatory supervisor |

**Compliance Summary:**QtrQtr: SESE Sec: 33 Twp: 2N Range: 66W**Inspector Comment:****Related Facilities:**

| Facility ID | Type | Status | Status Date | Well Class | API Num   | Facility Name              | Insp Status |                                     |
|-------------|------|--------|-------------|------------|-----------|----------------------------|-------------|-------------------------------------|
| 243416      | WELL | PR     | 12/14/1999  | GW         | 123-11207 | UPRR 42 PAN AM "AT" TRUE 1 | PR          | <input type="checkbox"/>            |
| 417020      | WELL | PR     | 02/22/2011  | OW         | 123-31534 | COTTONWOOD 24-33           | PR          | <input checked="" type="checkbox"/> |
| 417039      | WELL | PR     | 02/22/2011  | OW         | 123-31546 | COTTONWOOD 9-33            | PR          | <input checked="" type="checkbox"/> |
| 417047      | WELL | PR     | 02/22/2011  | OW         | 123-31549 | COTTONWOOD 39-33           | SI          | <input checked="" type="checkbox"/> |

**Equipment:****Location Inventory**

|                              |                         |                      |                         |
|------------------------------|-------------------------|----------------------|-------------------------|
| Special Purpose Pits: _____  | Drilling Pits: <u>1</u> | Wells: <u>4</u>      | Production Pits: _____  |
| Condensate Tanks: _____      | Water Tanks: <u>1</u>   | Separators: <u>8</u> | Electric Motors: _____  |
| Gas or Diesel Mortors: _____ | Cavity Pumps: _____     | LACT Unit: _____     | Pump Jacks: _____       |
| Electric Generators: _____   | Gas Pipeline: <u>1</u>  | Oil Pipeline: _____  | Water Pipeline: _____   |
| Gas Compressors: _____       | VOC Combustor: <u>1</u> | Oil Tanks: <u>8</u>  | Dehydrator Units: _____ |
| Multi-Well Pits: _____       | Pigging Station: _____  | Flare: <u>1</u>      | Fuel Tanks: <u>8</u>    |

**Location**

Inspector Name: MONTOYA, JOHN

|                      |                              |         |                   |         |
|----------------------|------------------------------|---------|-------------------|---------|
| <b>Signs/Marker:</b> |                              |         |                   |         |
| Type                 | Satisfactory/Action Required | Comment | Corrective Action | CA Date |
| WELLHEAD             | SATISFACTORY                 |         |                   |         |

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

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

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

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

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

|                  |                              |         |                   |         |
|------------------|------------------------------|---------|-------------------|---------|
| <b>Fencing/:</b> |                              |         |                   |         |
| Type             | Satisfactory/Action Required | Comment | Corrective Action | CA Date |
| WELLHEAD         | SATISFACTORY                 |         |                   |         |

|                 |         |  |
|-----------------|---------|--|
| <b>Venting:</b> |         |  |
| Yes/No          | Comment |  |
|                 |         |  |

|                 |                              |         |                   |         |
|-----------------|------------------------------|---------|-------------------|---------|
| <b>Flaring:</b> |                              |         |                   |         |
| Type            | Satisfactory/Action Required | Comment | Corrective Action | CA Date |
|                 |                              |         |                   |         |

**Predrill**

Location ID: 417020

**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: 417020 Type: WELL API Number: 123-31534 Status: PR Insp. Status: PR

**Producing Well**

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

Facility ID: 417039 Type: WELL API Number: 123-31546 Status: PR Insp. Status: PR

**Producing Well**

Comment: PR

Facility ID: 417047 Type: WELL API Number: 123-31549 Status: PR Insp. Status: SI

**Idle Well**

Purpose: ☒ Shut In ☐ Temporarily Abandoned Reminder: \_\_\_\_\_  
 S/A/V: SATISFACTORY CA Date: \_\_\_\_\_  
 CA: \_\_\_\_\_  
 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? 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

Inspector Name: MONTOYA, JOHN

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? \_\_\_\_\_

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 \_\_\_\_\_

##### 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: RESIDENTIAL \_\_\_\_\_

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

S/A/V: SATISFACTOR Corrective Date: \_\_\_\_\_

Y \_\_\_\_\_

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

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

**Pits:** ☐ NO SURFACE INDICATION OF PIT

#### **COGCC Comments**

| Comment  | User     | Date       |  |
|--|----------|------------|--|
| THERE ARE 3 WELLS ON THIS PAD COTTONWOOD 24-33, 9-33, AND 39-33 THE TRUE WELL IS ON A DIFFERENT LOCATION | montoyaj | 12/11/2014 |  |