

**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:
02/06/2015Document Number:
670900075Overall Inspection:
SATISFACTORY**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	425687	425699	Peterson, Tom	<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
Avant, Paul	(720) 929-6457	Paul.Avant@Anadarko.com	All inspections
,		cogccinspections@anadarko.com	All inspections

Compliance Summary:QtrQtr: NWSE Sec: 36 Twp: 1N Range: 68W**Inspector Comment:****Related Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status	
425687	WELL	PR	07/26/2012	OW	123-34463	NORTHGLENN STATE 24-36	PR	<input checked="" type="checkbox"/>
425688	WELL	PR	07/03/2013	OW	123-34464	NORTHGLENN STATE 33-36	PR	<input checked="" type="checkbox"/>
425689	WELL	PR	07/03/2012	OW	123-34465	NORTHGLENN STATE 16-36	PR	<input checked="" type="checkbox"/>
425690	WELL	PR	09/17/2012	OW	123-34466	NORTHGLENN STATE 12-36	PR	<input checked="" type="checkbox"/>
425691	WELL	PR	07/03/2012	OW	123-34467	NORTHGLENN STATE 39-36	PR	<input checked="" type="checkbox"/>
425692	WELL	PR	09/17/2012	OW	123-34468	NORTHGLENN STATE 32-36	PR	<input checked="" type="checkbox"/>
425693	WELL	PR	08/15/2012	OW	123-34469	NORTHGLENN STATE 19-36X	PR	<input checked="" type="checkbox"/>
425694	WELL	PR	07/03/2012	OW	123-34470	NORTHGLENN STATE 15-36	PR	<input checked="" type="checkbox"/>
425695	WELL	PR	07/26/2012	OW	123-34471	NORTHGLENN STATE 10-36	PR	<input checked="" type="checkbox"/>
425696	WELL	PR	08/15/2012	OW	123-34472	NORTHGLENN STATE 23-36	PR	<input checked="" type="checkbox"/>
425697	WELL	PR	08/15/2012	OW	123-34473	NORTHGLENN STATE 36-36	PR	<input checked="" type="checkbox"/>

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425698	WELL	PR	09/17/2012	OW	123-34474	NORTHGLENN STATE 22-36	PR	<input checked="" type="checkbox"/>
425700	WELL	PR	07/03/2012	OW	123-34475	NORTHGLENN STATE 37-36	PR	<input checked="" type="checkbox"/>
425701	WELL	PR	08/15/2012	OW	123-34476	NORTHGLENN STATE 13-36	PR	<input checked="" type="checkbox"/>
425702	WELL	PR	07/13/2012	OW	123-34477	NORTHGLENN STATE 9-36	PR	<input checked="" type="checkbox"/>
425703	WELL	PR	07/06/2013	OW	123-34478	NORTHGLENN STATE 11-36	PR	<input checked="" type="checkbox"/>
425714	WELL	PR	08/15/2012	OW	123-34488	NORTHGLENN STATE 14-36	PR	<input checked="" type="checkbox"/>
425715	WELL	PR	07/28/2012	OW	123-34489	NORTHGLENN STATE 40-36	PR	<input checked="" type="checkbox"/>

Equipment:

Location Inventory

Special Purpose Pits: _____	Drilling Pits: _____	Wells: 18	Production Pits: _____
Condensate Tanks: _____	Water Tanks: 18	Separators: 18	Electric Motors: _____
Gas or Diesel Mortors: _____	Cavity Pumps: _____	LACT Unit: _____	Pump Jacks: _____
Electric Generators: _____	Gas Pipeline: 1	Oil Pipeline: _____	Water Pipeline: _____
Gas Compressors: _____	VOC Combustor: 1	Oil Tanks: 18	Dehydrator Units: _____
Multi-Well Pits: _____	Pigging Station: _____	Flare: 1	Fuel Tanks: _____

Location

<u>Signs/Marker:</u>				
Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
TANK LABELS/PLACARDS	SATISFACTORY	Placarding issues noted on prior inspection document #668302856 have been corrected		
WELLHEAD	SATISFACTORY			
BATTERY	SATISFACTORY			

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

Corrective Date: _____

Comment: _____

Corrective Action: _____

Spills:

Type	Area	Volume	Corrective action	CA Date
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☐ Multiple Spills and Releases?

Equipment:

Type	#	Satisfactory/Action Required	Comment	Corrective Action	CA Date
VRU	1	SATISFACTORY			

Venting:

Yes/No	Comment
NO	

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Flaring:				
Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date

Predrill

Location ID: 425687

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: 425687 Type: WELL API Number: 123-34463 Status: PR Insp. Status: PR

Producing Well

Comment: PR

Facility ID: 425688 Type: WELL API Number: 123-34464 Status: PR Insp. Status: PR

Producing Well

Comment: PR

Inspector Name: Peterson, Tom

Facility ID:	425689	Type:	WELL	API Number:	123-34465	Status:	PR	Insp. Status:	PR
<div>Producing Well</div> <div>Comment: PR</div>									
Facility ID:	425690	Type:	WELL	API Number:	123-34466	Status:	PR	Insp. Status:	PR
<div>Producing Well</div> <div>Comment: PR</div>									
Facility ID:	425691	Type:	WELL	API Number:	123-34467	Status:	PR	Insp. Status:	PR
<div>Producing Well</div> <div>Comment: PR</div>									
Facility ID:	425692	Type:	WELL	API Number:	123-34468	Status:	PR	Insp. Status:	PR
<div>Producing Well</div> <div>Comment: PR</div>									
Facility ID:	425693	Type:	WELL	API Number:	123-34469	Status:	PR	Insp. Status:	PR
<div>Producing Well</div> <div>Comment: PR</div>									
Facility ID:	425694	Type:	WELL	API Number:	123-34470	Status:	PR	Insp. Status:	PR
<div>Producing Well</div> <div>Comment: PR</div>									
Facility ID:	425695	Type:	WELL	API Number:	123-34471	Status:	PR	Insp. Status:	PR
<div>Producing Well</div> <div>Comment: PR</div>									
Facility ID:	425696	Type:	WELL	API Number:	123-34472	Status:	PR	Insp. Status:	PR
<div>Producing Well</div> <div>Comment: PR</div>									
Facility ID:	425697	Type:	WELL	API Number:	123-34473	Status:	PR	Insp. Status:	PR
<div>Producing Well</div> <div>Comment: PR</div>									
Facility ID:	425698	Type:	WELL	API Number:	123-34474	Status:	PR	Insp. Status:	PR
<div>Producing Well</div> <div>Comment: PR</div>									
Facility ID:	425700	Type:	WELL	API Number:	123-34475	Status:	PR	Insp. Status:	PR
<div>Producing Well</div> <div>Comment: PR</div>									
Facility ID:	425701	Type:	WELL	API Number:	123-34476	Status:	PR	Insp. Status:	PR

Inspector Name: Peterson, Tom

Producing Well

Comment: **PR**

Facility ID: 425702 Type: WELL API Number: 123-34477 Status: PR Insp. Status: PR

Producing Well

Comment: **PR**

Facility ID: 425703 Type: WELL API Number: 123-34478 Status: PR Insp. Status: PR

Producing Well

Comment: **PR**

Facility ID: 425714 Type: WELL API Number: 123-34488 Status: PR Insp. Status: PR

Producing Well

Comment: **PR**

Facility ID: 425715 Type: WELL API Number: 123-34489 Status: PR Insp. Status: PR

Producing Well

Comment: **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): Y

Comment: _____

Pilot: ON Wildlife Protection Devices (fired vessels): YES

Reclamation - Storm Water - Pit

Interim Reclamation:

Date Interim Reclamation Started: _____ Date Interim Reclamation Completed: _____

Land Use: IRRIGATED

Comment: _____

1003a. Debris removed? Pass CM _____

CA _____ CA Date _____

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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? _____ 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: 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: _____

Corrective Action: _____ Date _____

Overall Final Reclamation _____ Well Release on Active Location ☐ Multi-Well Location ☐

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Storm Water:

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

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

Comment: _____

CA: _____

Pits: ☒ NO SURFACE INDICATION OF PIT