

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:
09/18/2015

Document Number:
671105182

Overall Inspection:
SATISFACTORY

FIELD INSPECTION FORM

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	<u>432229</u>	<u>432232</u>	<u>MONTOYA, JOHN</u>	<input type="checkbox"/>	

Operator Information:

OGCC Operator Number:	<u>47120</u>
Name of Operator:	<u>KERR MCGEE OIL & GAS ONSHORE LP</u>
Address:	<u>P O BOX 173779</u>
City:	<u>DENVER</u> State: <u>CO</u> Zip: <u>80217-</u>

- 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@anadarko.com	All Inspections
Avant, Paul	720-929-6475	Paul.Avant@anadarko.com	regulatory
REDDY, LUKE		Luke.Reddy@anadarko.com	ALL INSPECTIONS

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	DA	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"/>
443133	TANK BATTERY	AC	02/28/2014		-	KUNZMAN FEDERAL 35N-8HZ	AC	<input type="checkbox"/>
443134	TANK BATTERY	AC	02/28/2014		-	KUNZMAN FEDERAL 35N-8HZ	AC	<input type="checkbox"/>

Equipment: Location Inventory

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
WELLHEAD	SATISFACTORY			

Emergency Contact Number (S/A/V): SATISFACTORY Corrective Date: _____

Comment: _____

Corrective Action: _____

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

Fencing/:				
Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
WELLHEAD	SATISFACTORY	ROD IRON FENCESE CORNERN40.09587 W-104.48231		

Equipment:					
Type	#	Satisfactory/Action Required	Comment	Corrective Action	CA Date
Plunger Lift	1	SATISFACTORY			

Venting:	
Yes/No	Comment

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

Predrill

Location ID: 432229

Site Preparation:

Lease Road Adeq.: _____ Pads: _____ Soil Stockpile: _____

S/AV: _____

Corrective Action: _____ Date: _____ CDP Num.: _____

Form 2A COAs:

S/AV: _____ **Comment:** _____

CA: _____ **Date:** _____

Wildlife BMPs:

S/AV: _____ **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 Well

Comment: PR

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

Producing Well

Comment: PR

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

Producing Well

Comment: PR

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

Producing Well

Comment: PR

Facility ID: 432238	Type: WELL	API Number: 123-37034	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): _____

Comment: _____

Pilot: _____ Wildlife Protection Devices (fired vessels): _____

Reclamation - Storm Water - Pit

Interim Reclamation:

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

Land Use: IRRIGATED

Comment: _____

1003a. Debris removed? _____ CM _____
 CA _____ CA Date _____
 Waste Material Onsite? _____ CM _____
 CA _____ CA Date _____
 Unused or unneeded equipment onsite? _____ CM _____
 CA _____ CA Date _____
 Pit, cellars, rat holes and other bores closed? _____ CM _____
 CA _____ CA Date _____
 Guy line anchors removed? _____ 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 <input type="checkbox"/>
	Multi-Well Location <input type="checkbox"/>

Storm Water:						
Loc Erosion BMPs	BMP Maintenance	Lease Road Erosion BMPs	Lease BMP Maintenance	Chemical BMPs	Chemical BMP Maintenance	Comment

S/A/V: _____ Corrective Date: _____

Comment: _____

CA: _____

Pits: NO SURFACE INDICATION OF PIT

COGCC Comments

Comment	User	Date
WELL ON INTERMITTER CONTROLLER, DOCUMENT #668703483, DATED 9/4/15 WEEDS AND UNUSED EQUIPMENT TAKEN CARE OF, WEEDS CUT AND UNUSED EQUIPMENT REMOVED	montoyaj	09/18/2015