

**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

Inspection Date:

08/17/2016

Document Number:

685500498

Overall Inspection:

SATISFACTORY**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	430973	430972	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
		COGCCinspections@anadarko.com	All Inspections
REDDY, LUKE		Luke.Reddy@anadarko.com	ALL INSPECTIONS

Compliance Summary:QtrQtr: SWSW Sec: 27 Twp: 2N Range: 65W**Inspector Comment:****Related Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status	
430973	WELL	PR	05/03/2013	GW	123-36362	POWERS 4C-27HZ	PR	<input checked="" type="checkbox"/>
430974	WELL	PR	05/04/2013	GW	123-36363	POWERS 4N-27HZ	PR	<input checked="" type="checkbox"/>
430975	WELL	PR	05/01/2013	OW	123-36364	POWERS 30N-27HZ	PR	<input checked="" type="checkbox"/>
430976	WELL	PR	05/01/2013	OW	123-36365	POWERS 30C-27HZ	PR	<input checked="" type="checkbox"/>

Equipment:**Location Inventory**

Special Purpose Pits: _____	Drilling Pits: <u>2</u>	Wells: <u>4</u>	Production Pits: _____
Condensate Tanks: _____	Water Tanks: _____	Separators: _____	Electric Motors: _____
Gas or Diesel Mortors: _____	Cavity Pumps: _____	LACT Unit: _____	Pump Jacks: <u>4</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

Inspector Name: MONTOYA, JOHN

Lease Road:				
Type	Satisfactory/Action Required	comment	Corrective Action	Date
Main	SATISFACTORY			

Signs/Marker:				
Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
WELLHEAD	SATISFACTORY			

Emergency Contact Number (S/AR): 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 FENCES AROUND ALL 4 WELLHEADSSE CORNERN40,06221 W-104.39427		

Equipment:				
Type: Plunger Lift	# 4	Satisfactory/Action Required: SATISFACTORY		
Comment				
Corrective Action				Date:

Venting:	
Yes/No	NO
Comment	

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

Predrill

Location ID: 430973

Lease Road Adeq.: _____

Pads: _____

Soil Stockpile: _____

S/AR: _____

Corrective Action: _____

Date: _____

CDP Num.: _____

Form 2A COAs:**S/AR:** _____ **Comment:** _____**CA:** _____ **Date:** _____**Wildlife BMPs:**

BMP Type	Comment
Construction	<p>Due to the significant number of horizontal wells to be developed in close proximity to the town of Hudson (33 total) and the fact that several of these wells will be drilled at the same time, Anadarko will work with the Town of Hudson to ensure many of the issues brought up by the Town Manager are addressed in a manner agreeable to both Anadarko and the Town of Hudson. This will include the following:</p> <ol style="list-style-type: none"> 1. Anadarko will perform a road impact study for all roads belonging to the Town of Hudson prior to operations and then a second road impact study subsequent to drilling and completion operations. Anadarko will pay for all required fixes to ensure any damaged roads are brought back to their condition prior to our operations 2. Anadarko will take appropriate steps to adequately protect valve boxes and manholes located along any of our access roads 3. In conjunction with the Town of Hudson, Anadarko will develop a site specific traffic management plan that will address the following: (1) expected traffic and timing of such traffic, (2) how traffic in busy or sensitive intersections will be managed and mitigated, and (3) what truck traffic restrictions will be put in place, if any 4. Anadarko will provide the Town of Hudson an emergency response plan prior to commencing operations

S/AR: _____ **Comment:** _____**CA:** _____ **Date:** _____**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: 430973 Type: WELL API Number: 123-36362 Status: PR Insp. Status: PR

Producing Well

Comment: PR

BradenHead

Comment: BRADENHEAD PLUMBED TO SURFACE

CA:

CA Date:

Facility ID: 430974 Type: WELL API Number: 123-36363 Status: PR Insp. Status: PR

Producing Well

Comment: PR

BradenHead

Comment: BRADENHEAD PLUMBED TO SURFACE

CA:

CA Date:

Facility ID: 430975 Type: WELL API Number: 123-36364 Status: PR Insp. Status: PR

Producing Well

Comment: PR

BradenHead

Comment: BRADENHEAD PLUMBED TO SURFACE

CA:

CA Date:

Facility ID: 430976 Type: WELL API Number: 123-36365 Status: PR Insp. Status: PR

Producing Well

Comment: PR

BradenHead

Comment: BRADENHEAD PLUMBED TO SURFACE

CA:

CA Date:

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:

Inspector Name: MONTOYA, JOHN

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: RANGELAND

Comment: _____

1003a. Waste and Debris removed? 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 marked? _____

CM _____

CA _____ CA Date _____

1003b. Area no longer in use? _____ 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? _____

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: _____

Inspector Name: MONTOYA, JOHN

Final Land Use: RANGELAND

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	Gravel	Pass			

S/A/V: SATISFACTORY

Corrective Date: _____

Comment: _____

CA: _____

Pits: ☒ NO SURFACE INDICATION OF PIT

COGCC Comments

Comment	User	Date
INTERMITTER CONTROLLERS ON ALL 4 WELLHEADS	montoyaj	08/17/2016