

**FORM  
INSP**Rev  
X/15**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:

10/27/2016

Submitted Date:

10/31/2016

Document Number:

685301671**FIELD INSPECTION FORM**
 Loc ID 313518 Inspector Name: St John, William (Cal) On-Site Inspection ☐ 2A Doc Num:                     
**Operator Information:**OGCC Operator Number: 46685Name of Operator: KINDER MORGAN CO2 CO LPAddress: 1001 LOUISIANA ST SUITE 1000City: HOUSTON State: TX Zip: 77002**Status Summary:**

- ☐ THIS IS A FOLLOW UP INSPECTION
- ☐ FOLLOW UP INSPECTION REQUIRED
- ☒ NO FOLLOW UP INSPECTION REQUIRED

**Findings:**6 Number of Comments0 Number of Corrective Actions☐ Corrective Action Response Requested**Contact Information:**

Contact Name	Phone	Email	Comment
Conway, James	970-882-5505	james_conway@kindermorgan.com	<a href="#">SW Inspection Reports</a>
Labowskie, Steve		steve.labowskie@state.co.us	<a href="#">COGCC</a>
Swift, Barry	970-882-5545	barry_swift@kindermorgan.com	<a href="#">SW Inspection Reports</a>
Millican, Chris	970-882-5504	chris_millican@kindermorgan.com	<a href="#">SW Inspection Reports</a>

**Inspected Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
224324	WELL	PR	01/31/2011	GW	083-06389	MCELMO DOME UNIT 6-37-18 HF-1	PR

**General Comment:**

**Location****Lease Road:**

Type	Access		
comment:			
Corrective Action	L	Date:	

Overall Good: ☐**Signs/Marker:**

Type	WELLHEAD		
Comment:			
Corrective Action:		Date:	

**Emergency Contact Number:**

Comment:		
Corrective Action:		Date: _____

Overall Good: ☐**Spills:**

Type	Area	Volume		
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In Containment: No

Comment: ☐ Multiple Spills and Releases?**Fencing/:**

Type	LOCATION		
Comment:	Post and Wire.		
Corrective Action:		Date:	

**Equipment:**

Type: Ancillary equipment	# 1		corrective date
Comment:			
Corrective Action:		Date:	
Type: Flow Line	# 1		
Comment:			
Corrective Action:		Date:	

**Venting:**

Yes/No	NO		
Comment:			
Corrective Action:		Date:	

**Flaring:**

Type		
Comment:		
Corrective Action:		Date:

Inspected Facilities									
Facility ID:	224324	Type:	WELL	API Number:	083-06389	Status:	PR	Insp. Status:	PR
Producing Well									
Comment:	PR								
Corrective Action:						Date:			

**Reclamation - Storm Water - Pit****Storm Water:**

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

Comment: Corrective Action: Date: **Pits:** ☒ NO SURFACE INDICATION OF PIT**Attached Documents**You can go to COGCC Images (<https://cogcc.state.co.us/weblink/>) and search by document number:

Document Num	Description	URL
685301671	INSPECTION SUBMITTED	<a href="http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3988806">http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3988806</a>