

**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:

01/17/2017

Submitted Date:

01/17/2017

Document Number:

674004759**FIELD INSPECTION FORM**
 Loc ID 328344 Inspector Name: Carlile, Craig On-Site Inspection ☐ 2A Doc Num: _____
Operator Information:OGCC Operator Number: 47120Name of Operator: KERR MCGEE OIL & GAS ONSHORE LPAddress: P O BOX 173779City: DENVER State: CO Zip: 80217-**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 |
|---------------|-------|-------------------------------|---------------------------------|
| , Inspections | | COGCCinspections@Anadarko.com | All Inspections |

Inspected Facilities:

| Facility ID | Type | Status | Status Date | Well Class | API Num | Facility Name | Insp Status |
|-------------|------|--------|-------------|------------|-----------|-----------------|-------------|
| 248075 | WELL | PR | 01/02/1998 | GW | 123-15873 | HSR-KELLER 13-2 | SI |

General Comment:

LocationOverall Good: ☒

| | | | |
|----------------------|----------|-------|--|
| Signs/Marker: | | | |
| Type | WELLHEAD | | |
| Comment: | | | |
| Corrective Action: | | Date: | |

Emergency Contact Number:

Comment:

Corrective Action: Date:

Overall Good: ☒

| | | | | | |
|----------------|------|--------|--|--|--|
| Spills: | | | | | |
| Type | Area | Volume | | | |

In Containment: No

Comment: ☐ Multiple Spills and Releases?

| | | | |
|--------------------|----------|-------|--|
| Fencing/: | | | |
| Type | WELLHEAD | | |
| Comment: | Pipe | | |
| Corrective Action: | | Date: | |

| | | | |
|--------------------|-----|-------|-----------------|
| Equipment: | | | corrective date |
| Type: Plunger Lift | # 1 | | |
| Comment: | | | |
| Corrective Action: | | Date: | |

Tanks and Berms:

| Contents | # | Capacity | Type | Tank ID | SE GPS |
|--------------------|------------------------------|----------|---------------------|---------|--------|
| | | | CENTRALIZED BATTERY | | , |
| Comment: | Shared with API 05-123-21295 | | | | |
| Corrective Action: | | | | Date: | |

Paint

| | | |
|------------------|--|--|
| Condition | | |
| Other (Content) | | |
| Other (Capacity) | | |
| Other (Type) | | |

Berms

| Type | Capacity | Permeability (Wall) | Permeability (Base) | Maintenance |
|--------------------|----------|---------------------|---------------------|-------------|
| | | | | |
| Comment: | | | | |
| Corrective Action: | | | Date: | |

Venting:

| | | | |
|--------------------|--|-------|--|
| Yes/No | | | |
| Comment: | | | |
| Corrective Action: | | Date: | |

Flaring:

| | | |
|--------------------|--|-------|
| Type | | |
| Comment: | | |
| Corrective Action: | | Date: |

Inspected FacilitiesFacility ID: 248075 Type: WELL API Number: 123-15873 Status: PR Insp. Status: SI**Idle Well**Purpose: ☒ Shut In ☐ Temporarily Abandoned

Reminder: _____

Comment: Shut in at wellhead.

Corrective Action: _____

Date: _____

BradenHeadComment: Bradenhead plumbed to surface.

Corrective Action: _____

Date: _____

Environmental**Spills/Releases:**

| | | | |
|-----------------------------|-------|-------------------------|-------------|
| Type of Spill: | _____ | Estimated Spill Volume: | _____ |
| Comment: | _____ | | |
| Corrective Action: | _____ | | Date: _____ |
| Reportable: | _____ | GPS: Lat _____ | Long _____ |
| Proximity to Surface Water: | _____ | Depth to Ground Water: | _____ |

Water Well Complaint:

| | | | |
|------------------|-------|-------------|-------|
| | | Lat | Long |
| DWR Receipt Num: | _____ | Owner Name: | _____ |
| | | GPS : | _____ |

Field Parameters:

| | | | |
|------------------|-------|----------|-------|
| Sample Location: | _____ | Comment: | _____ |
|------------------|-------|----------|-------|

Spill/Remediation:

| | | | |
|--------------------|-------|-------|-------|
| Comment: | _____ | | |
| Corrective Action: | _____ | Date: | _____ |

Emission Control Burner (ECB): YES _____

Comment: _____

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

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

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

Comment: Corrective Action: Date: **Pits:** ☒ NO SURFACE INDICATION OF PIT**COGCC Comments**

| Comment | User | Date |
|-------------------------------------|----------|------------|
| Routine inspection. | carlilec | 01/17/2017 |

Attached DocumentsYou can go to COGCC Images (<https://cogcc.state.co.us/weblink/>) and search by document number:

| Document Num | Description | URL |
|--------------|----------------------|---|
| 401186785 | INSPECTION SUBMITTED | http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4052963 |