

**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:

03/24/2017

Submitted Date:

03/24/2017

Document Number:

675103454**FIELD INSPECTION FORM**

Loc ID 336451 Inspector Name: GRANAHAN, KYLE On-Site Inspection ☐ 2A Doc Num: _____

Operator Information:OGCC Operator Number: 49100Name of Operator: KOCH EXPLORATION COMPANY, LLCAddress: 950 17TH STREET #1900City: DENVER State: CO Zip: 80202**Status Summary:**

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

Findings:9 Number of Comments0 Number of Corrective Actions☐ Corrective Action Response Requested**Contact Information:**

Contact Name	Phone	Email	Comment
Clark, John	505-334-9111	clark23j@kochind.com	Rio Blanco insp

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
257850	WELL	PR	11/06/2002	GW	103-10041	WRD FEDERAL 19-21	PR
263073	WELL	PR	02/01/2011	GW	103-10231	ANT HILL UNIT 19-22D	SI

General Comment:

LocationOverall Good: ☒

Signs/Marker:			
Type	BATTERY		
Comment:	Present/complete		
Corrective Action:		Date:	
Type	TANK LABELS/PLACARDS		
Comment:	Present/complete		
Corrective Action:		Date:	
Type	WELLHEAD		
Comment:	Present/complete		
Corrective Action:		Date:	

Emergency Contact Number:

Comment: 877-352-4660

Corrective Action:

Date: _____

Overall Good: ☒

Spills:			
Type	Area	Volume	

In Containment: No

Comment:

☐ Multiple Spills and Releases?

Equipment:			corrective date
Type: Deadman # & Marked	# 8		
Comment:			
Corrective Action:		Date:	
Type: Plunger Lift	# 2		
Comment:			
Corrective Action:		Date:	
Type: Ancillary equipment	# 2		
Comment:	Chemical tote with secondary containment		
Corrective Action:		Date:	
Type: Horizontal Heated Separator	# 1		
Comment:			
Corrective Action:		Date:	
Type: Gas Meter Run	# 2		
Comment:			
Corrective Action:		Date:	
Type: Bird Protectors	# 3		
Comment:			

Corrective Action:		Date:	
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Tanks and Berms:

Contents	#	Capacity	Type	Tank ID	SE GPS
PRODUCED WATER	2	300 BBLs	STEEL AST		,

Comment:	
Corrective Action:	Date:

Paint

Condition	Adequate
Other (Content)	
Other (Capacity)	
Other (Type)	

Berms

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

Contents	#	Capacity	Type	Tank ID	SE GPS
CRUDE OIL	2	300 BBLs	HEATED STEEL AST		,

Comment:	
Corrective Action:	Date:

Paint

Condition	Adequate
Other (Content)	
Other (Capacity)	
Other (Type)	

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Metal	Adequate	Walls Sufficient	Base Sufficient	Adequate
Comment:				
Corrective Action:	Date:			

Venting:

Yes/No	NO
Comment:	
Corrective Action:	Date:

Flaring:

Type	
Comment:	
Corrective Action:	Date:

Inspected FacilitiesFacility ID: 257850 Type: WELL API Number: 103-10041 Status: PR Insp. Status: PR**Producing Well**Comment: Pr - via plunger lift system, no leaks/venting. Remote pressure monitoring present.

Corrective Action:

Date:

Facility ID: 263073 Type: WELL API Number: 103-10231 Status: PR Insp. Status: SI**Idle Well**Purpose: ☒ Shut In ☐ Temporarily AbandonedReminder: EQUIPMENT ONSITEComment: SI at time of inspection - no leaks/venting.

Corrective Action:

Date:

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

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

Land Use: _____

Comment: _____

1002 SITE PREPARATION AND STABILIZATION

1002a. FENCING _____

Comment _____

Corrective Action _____

Date _____

1002b. SOIL REMOVAL AND
SEGREGATION _____

Comment _____

Corrective Action _____

Date _____

1002c. PROTECTION OF SOILS _____

Comment _____

Corrective Action _____

Date _____

1002E. SURFACE DISTURBANCE MINIMIZATION _____ Pass _____

Comment _____

Corrective Action _____

Date _____

1003a. Waste and Debris removed? _____ Pass _____

Comment _____

Corrective Action _____

Date _____

Unused or unneeded equipment onsite? _____ Pass _____

Comment _____

Corrective Action _____

Date _____

Pit, cellars, rat holes and other bores closed? _____ Pass _____

Comment _____

Corrective Action _____

Date _____

Guy line anchors marked? _____ Pass _____

Comment _____

Corrective Action _____

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 REVEGETATIONCropland

Top soil replaced _____ Recontoured _____ Perennial forage re-established _____

Non-Cropland

Top soil replaced _____ Recontoured _____ 80% Revegetation _____

1003e. INTERIM VEGETATION TRANSECT

TRANSECT RESULTS OF DISTURBED AREA% _____

TRANSECT RESULTS OF REFERENCE AREA% _____

TOTAL % OF DESIRABLE VEGETATION COVER _____

VEGETATIVE COVER _____

1003 f. Weeds Noxious weeds? _____

Comment _____

Corrective Action _____ Date _____

Overall Interim Reclamation**Final Reclamation/ Abandoned Location:**

Date Final Reclamation Started: _____ Date Final Reclamation Completed: _____

Final Land Use: _____

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 _____

1004.d. FINAL VEGETATION TRANSECT

TRANSECT RESULTS OF DISTURBED AREA% _____

TRANSECT RESULTS OF REFERENCE AREA% _____

TOTAL % OF DESIRABLE VEGETATION COVER _____

VEGETATIVE COVER _____

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					
Compaction	Pass					

Comment:

No sediment flow evident

Corrective Action:

Date:

Pits: ☒ NO SURFACE INDICATION OF PIT