

**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:

04/20/2017

Submitted Date:

04/24/2017

Document Number:

680301895**FIELD INSPECTION FORM**

Loc ID 313821 Inspector Name: SCHURE, KYM On-Site Inspection ☐ 2A Doc Num: _____

Operator Information:OGCC Operator Number: 18600Name of Operator: COLORADO INTERSTATE GAS COMPANY LLCAddress: P O BOX 1087City: COLORADO State: CO Zip: 80944**Status Summary:**

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

Findings:7 Number of Comments0 Number of Corrective Actions☐ Corrective Action Response Requested**Contact Information:**

| Contact Name | Phone | Email | Comment |
|---------------|--------------|-------------------------------|---------|
| Livley, Kevin | 970-867-4243 | kevin_lively@kindermorgan.com | |

Inspected Facilities:

| Facility ID | Type | Status | Status Date | Well Class | API Num | Facility Name | Insp Status |
|-------------|--------------|--------|-------------|------------|-----------|-----------------------|-------------|
| 150052 | UIC DISPOSAL | AC | 05/06/1963 | | - | FORT MORGAN UNIT 5 | SI |
| 225509 | WELL | IJ | 01/19/2012 | DSPW | 087-05922 | FORT MORGAN UNIT 5-WD | IJ |

General Comment:

Bradenhead Inspection. Note to Operator: Please submit Form 17 via COGCC e-form

Location**Lease Road:**

| | | | |
|-------------------|--------------|-------|--|
| Type | Access | | |
| comment: | Satisfactory | | |
| Corrective Action | L | Date: | |

Overall Good: ☐**Signs/Marker:**

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

Emergency Contact Number:

Comment: Satisfactory

Corrective Action: _____ Date: _____

Overall Good: ☒**Spills:**

| | | | | |
|------|------|--------|--|--|
| Type | Area | Volume | | |
|------|------|--------|--|--|

In Containment: No

Comment: _____

☐ Multiple Spills and Releases?**Equipment:**

| | | | |
|--------------------|------------------------------------|-------|-----------------|
| Type: Other | # 0 | | corrective date |
| Comment: | No change in equipment inventoried | | |
| Corrective Action: | | Date: | |

Venting:

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

Flaring:

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

| Inspected Facilities | | | | | | | | | | |
|----------------------|--------|---|------|-------------|-----------|---------|----|---------------|----|-------------|
| Facility ID: | 150052 | Type: | UIC | API Number: | - | Status: | AC | Insp. Status: | SI | |
| Facility ID: | 225509 | Type: | WELL | API Number: | 087-05922 | Status: | IJ | Insp. Status: | IJ | |
| BradenHead | | | | | | | | | | |
| Comment: | | <div>Well shut-in for test/maintenance. Instantaneous PSIG = 27</div> | | | | | | | | |
| Corrective Action: | | <div></div> | | | | | | Date: | | <div></div> |

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 | Other | In Process | | | |

Comment: Satisfactory

Corrective Action:

Date:

Pits: ☐ NO SURFACE INDICATION OF PIT