

**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:

05/24/2017

Submitted Date:

05/24/2017

Document Number:

673404651**FIELD INSPECTION FORM**

Loc ID 312779 Inspector Name: Waldron, Emily On-Site Inspection ☐ 2A Doc Num: \_\_\_\_\_

**Operator Information:**OGCC Operator Number: 45898Name of Operator: KAISER-FRANCIS OIL COMPANYAddress: P O BOX 21468City: TULSA State: OK Zip: 74121**Status Summary:**

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

**Findings:**10 Number of Comments1 Number of Corrective Actions☒ Corrective Action Response Requested**Contact Information:**

Contact Name	Phone	Email	Comment
VanValkenburg, Charlotte		CharlotV@kfoc.net	<a href="#">Official Contact</a>

**Inspected Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
222379	WELL	PR	10/22/1956	GW	081-05370	GOVT-WINDER 1	SI

**General Comment:**[2017 Flowline NTO Inspection Statewide](#)

**Location**Overall Good: ☒

<b>Signs/Marker:</b>			
Type	WELLHEAD		
Comment:			
Corrective Action:		Date:	
Type	CONTAINERS		
Comment:	No label on methanol container.		
Corrective Action:	Install sign to comply with Rule 210.d.	Date:	06/26/2017
Type	BATTERY		
Comment:	At access road and county road and entrance to location.		
Corrective Action:		Date:	

Emergency Contact Number:

Comment: 405-262-5511

Corrective Action:

Date: \_\_\_\_\_

Overall Good: ☒

<b>Spills:</b>				
Type	Area	Volume		

In Containment: No

Comment:

☐ Multiple Spills and Releases?

<b>Fencing/:</b>			
Type	PUMP JACK		
Comment:			
Corrective Action:		Date:	

<b>Equipment:</b>			corrective date
Type: Flow Line	#		
Comment:	NOT IN USE: 1 - 1" steel riser at wellhead		
Corrective Action:		Date:	
Type: Deadman # & Marked	# 4		
Comment:			
Corrective Action:		Date:	
Type: Pump Jack	# 1		
Comment:	Cellar full of water.		
Corrective Action:		Date:	
Type: Flow Line	#		
Comment:	IN USE: 1 -2" insulated riser at wellhead 1 -2" steel flowline drop down to 1" from wellhead to pumpjack motor 1 - line from methanol to wellhead		
Corrective Action:		Date:	

<b>Venting:</b>			
Yes/No	NO		
Comment:			
Corrective Action:		Date:	
<b>Flaring:</b>			
Type			
Comment:			
Corrective Action:		Date:	

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Inspected Facilities									
Facility ID:	222379	Type:	WELL	API Number:	081-05370	Status:	PR	Insp. Status:	SI
Idle Well									
Purpose: <input checked="" type="checkbox"/> Shut In <input type="checkbox"/> Temporarily Abandoned      Reminder: _____									
Comment: <input type="text" value="Not pumping."/> _____									
Corrective Action: <input type="text"/> _____      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

Comment: [No apparent soil migration; erosion or soil movement.](#)

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
401295967	INSPECTION SUBMITTED	<a href="http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4158597">http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4158597</a>
673404655	Inspection Photos	<a href="http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4158582">http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4158582</a>