

**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:

05/31/2017

Submitted Date:

05/31/2017

Document Number:

674200101**FIELD INSPECTION FORM**

Loc ID 336647 Inspector Name: Gomez, Jason 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:**23 Number of Comments0 Number of Corrective Actions☐ Corrective Action Response Requested**Contact Information:**

Contact Name	Phone	Email	Comment
, General		COGCCinspections@Anadarko.com	

**Inspected Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
248716	WELL	PR	05/06/2002	GW	123-16518	HSR-BATES 16-7	EG
251111	WELL	PR	05/20/2002	GW	123-18914	HSR-TUTTLE 10-7A	EG
251112	WELL	PR	11/21/2009	GW	123-18915	HSR-TUTTLE 15-7A	EG
414517	WELL	PR	05/14/2010	OW	123-30772	BELLA FEDERAL 24-7	EG
414535	WELL	PR	05/25/2010	OW	123-30776	BELLA FEDERAL 36-7	EG
414542	WELL	PR	05/15/2010	OW	123-30782	BELLA FEDERAL 23-7	EG
414545	WELL	PR	05/30/2010	OW	123-30783	BELLA FEDERAL 37-7	EG

**General Comment:**

2017 Flowline NTO Inspection 1000' Buffer  
Shadowing Operator Abandonment Team

**Location**Overall Good: ☒**Signs/Marker:**

Type	WELLHEAD		
Comment:			
Corrective Action:		Date:	
Type	WELLHEAD		
Comment:			
Corrective Action:		Date:	
Type	WELLHEAD		
Comment:			
Corrective Action:		Date:	
Type	WELLHEAD		
Comment:			
Corrective Action:		Date:	
Type	WELLHEAD		
Comment:			
Corrective Action:		Date:	
Type	WELLHEAD		
Comment:			
Corrective Action:		Date:	
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	WELLHEAD		
Comment:	AG PANEL		
Corrective Action:		Date:	

**Equipment:**

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

**Tanks and Berms:**

Contents	#	Capacity	Type	Tank ID	SE GPS	
			CENTRALIZED BATTERY		,	
Comment:						
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	NO		
Comment:			
Corrective Action:			Date:

**Flaring:**

Type		
Comment:		
Corrective Action:		Date:

**Inspected Facilities**Facility ID: 248716 Type: WELL API Number: 123-16518 Status: PR Insp. Status: EG**Idle Well**Purpose: ☒ Shut In ☐ Temporarily AbandonedReminder: EQUIPMENT ONSITEComment: SICorrective Action: Date: **BradenHead**Comment: PLUMBED TO SURFACECorrective Action: Date: **Flowline**#7 Type: of Lines Flowline DescriptionFlowline Type: Size: Material: Variance: Age: Contents: Integrity SummaryFailures: Spills: Repairs Made: Coatings: H2S: Cathodic Protection: Pressure TestingWitnessed: Test Result: Charted: COGCC Rules(check all that apply)☐ 1101. Installation and Reclamation☐ 1102. Operations, Maintenance, and Repair☒ 1103. AbandonmentComment: 1-1" STEEL RISER ABONDON @ WELLHEAD PER NTOCorrective Action: Date: Facility ID: 251111 Type: WELL API Number: 123-18914 Status: PR Insp. Status: EG**Idle Well**Purpose: ☒ Shut In ☐ Temporarily AbandonedReminder: EQUIPMENT ONSITEComment: SICorrective Action: Date: **BradenHead**Comment: PLUMBED TO SURFACECorrective Action: Date: **Flowline**#6 Type: of Lines Flowline DescriptionFlowline Type: Size: Material: Variance: Age: Contents: Integrity Summary

Failures:	Spills:	Repairs Made:
Coatings:	H2S:	Cathodic Protection:
<u>Pressure Testing</u>		
Witnessed:	Test Result:	Charted:
<u>COGCC Rules(check all that apply)</u>		
<input type="checkbox"/> 1101. Installation and Reclamation <input type="checkbox"/> 1102. Operations, Maintenance, and Repair <input checked="" type="checkbox"/> 1103. Abandonment		
Comment: <u>1-1" STEEL RISER ABONDON @ WELLHEAD PER NTO</u>		
Corrective Action:		Date:
Facility ID: <u>251112</u>	Type: <u>WELL</u>	API Number: <u>123-18915</u> Status: <u>PR</u> Insp. Status: <u>EG</u>

<b><u>Idle Well</u></b>		
Purpose: <input checked="" type="checkbox"/> Shut In <input type="checkbox"/> Temporarily Abandoned	Reminder: <u>EQUIPMENT ONSITE</u>	
Comment: <u>SI</u>		
Corrective Action:		Date:

<b><u>BradenHead</u></b>		
Comment: <u>PLUMBED TO SURFACE</u>		
Corrective Action:		Date:

<b><u>Flowline</u></b>		
#5	Type:	of Lines

<u>Flowline Description</u>		
Flowline Type:	Size:	Material:
Variance:	Age:	Contents:

<u>Integrity Summary</u>		
Failures:	Spills:	Repairs Made:
Coatings:	H2S:	Cathodic Protection:

<u>Pressure Testing</u>		
Witnessed:	Test Result:	Charted:
<u>COGCC Rules(check all that apply)</u>		
<input type="checkbox"/> 1101. Installation and Reclamation <input type="checkbox"/> 1102. Operations, Maintenance, and Repair <input checked="" type="checkbox"/> 1103. Abandonment		
Comment: <u>1-1" STEEL RISER ABONDON @ WELLHEAD PER NTO</u>		
Corrective Action:		Date:
Facility ID: <u>414517</u>	Type: <u>WELL</u>	API Number: <u>123-30772</u> Status: <u>PR</u> Insp. Status: <u>EG</u>

<b><u>Idle Well</u></b>		
Purpose: <input checked="" type="checkbox"/> Shut In <input type="checkbox"/> Temporarily Abandoned	Reminder: <u>EQUIPMENT ONSITE</u>	
Comment: <u>SI</u>		
Corrective Action:		Date:

<b><u>BradenHead</u></b>		
Comment: <u>PLUMBED TO SURFACE</u>		
Corrective Action:		Date:

<b>Flowline</b>			
#4	Type:	of Lines	
<u>Flowline Description</u>			
Flowline Type:		Size:	Material:
Variance:		Age:	Contents:
<u>Integrity Summary</u>			
Failures:		Spills:	Repairs Made:
Coatings:		H2S:	Cathodic Protection:
<u>Pressure Testing</u>			
Witnessed:		Test Result:	Charted:
<u>COGCC Rules(check all that apply)</u>			
<input type="checkbox"/> 1101. Installation and Reclamation <input type="checkbox"/> 1102. Operations, Maintenance, and Repair <input checked="" type="checkbox"/> 1103. Abandonment			
Comment: <span style="color: blue;">1-1" STEEL RISER ABONDON @ WELLHEAD PER NTO</span>			
Corrective Action:			Date:
Facility ID: <u>414535</u> Type: <u>WELL</u> API Number: <u>123-30776</u> Status: <u>PR</u> Insp. Status: <u>EG</u>			

<b>Idle Well</b>	
Purpose: <input checked="" type="checkbox"/> Shut In <input type="checkbox"/> Temporarily Abandoned	Reminder: <u>EQUIPMENT ONSITE</u>
Comment: <span style="color: blue;">SI</span>	
Corrective Action:	Date: _____

<b>BradenHead</b>	
Comment: <span style="color: blue;">PLUMBED TO SURFACE</span>	
Corrective Action:	Date: _____

<b>Flowline</b>			
#3	Type:	of Lines	
<u>Flowline Description</u>			
Flowline Type:		Size:	Material:
Variance:		Age:	Contents:
<u>Integrity Summary</u>			
Failures:		Spills:	Repairs Made:
Coatings:		H2S:	Cathodic Protection:
<u>Pressure Testing</u>			
Witnessed:		Test Result:	Charted:
<u>COGCC Rules(check all that apply)</u>			
<input type="checkbox"/> 1101. Installation and Reclamation <input type="checkbox"/> 1102. Operations, Maintenance, and Repair <input checked="" type="checkbox"/> 1103. Abandonment			
Comment: <span style="color: blue;">1-1" STEEL RISER ABONDON @ WELLHEAD PER NTO</span>			
Corrective Action:			Date:
Facility ID: <u>414542</u> Type: <u>WELL</u> API Number: <u>123-30782</u> Status: <u>PR</u> Insp. Status: <u>EG</u>			

**Idle Well**Purpose: ☒ Shut In ☐ Temporarily Abandoned

Reminder: EQUIPMENT ONSITE

Comment: SI

Corrective Action:

Date:

**BradenHead**

Comment: PLUMBED TO SURFACE

Corrective Action:

Date:

**Flowline**

#2 Type:

of Lines

Flowline Description

Flowline Type:

Size:

Material:

Variance:

Age:

Contents:

Integrity Summary

Failures:

Spills:

Repairs Made:

Coatings:

H2S:

Cathodic Protection:

Pressure Testing

Witnessed:

Test Result:

Charted:

COGCC Rules(check all that apply)☐ 1101. Installation and Reclamation☐ 1102. Operations, Maintenance, and Repair☒ 1103. Abandonment

Comment: 1 - 1" STEEL RISER ABONDON 2 WELLHEAD PER NTO

Corrective Action:

Date:

Facility ID: 414545

Type: WELL

API Number: 123-30783

Status: PR

Insp. Status: EG

**Idle Well**Purpose: ☒ Shut In ☐ Temporarily Abandoned

Reminder: EQUIPMENT ONSITE

Comment:

Corrective Action:

Date:

**BradenHead**

Comment: PLUMBED TO SURFACE

Corrective Action:

Date:

**Flowline**

#1 Type:

of Lines

Flowline Description

Flowline Type:

Size:

Material:

Variance:

Age:

Contents:

Integrity Summary

Failures:

Spills:

Repairs Made:

Coatings:

H2S:

Cathodic Protection:

Pressure Testing

Witnessed:	Test Result:	Charted:
COGCC Rules(check all that apply)		
<input type="checkbox"/> 1101. Installation and Reclamation	<input type="checkbox"/> 1102. Operations, Maintenance, and Repair	<input checked="" type="checkbox"/> 1103. Abandonment
Comment: 1-1" STEEL RISER ABONDON PER NTO @ WELLHEAD		Date:
Corrective Action:		

**COGCC Comments**

Comment	User	Date
OBSERVED ANADARKO ABANDON 7 1" RISERS @ WELLHEADS PER NTO PROCEDURE	gomezj	05/31/2017

**Attached Documents**

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

Document Num	Description	URL
401297257	INSPECTION SUBMITTED	<a href="http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4159699">http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4159699</a>