

**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:

07/31/2017

Submitted Date:

08/02/2017

Document Number:

678300797**FIELD INSPECTION FORM**Loc ID _____ Inspector Name: GINTAUTAS, PETER 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:4 Number of Comments1 Number of Corrective Actions☒ Corrective Action Response Requested**Contact Information:**

Contact Name	Phone	Email	Comment
,		COGCCinspections@anadarko.com	All Inspections

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
451508	SPILL OR RELEASE	AC	07/28/2017		-	SPILL/RELEASE POINT	EI
451589	TANK BATTERY	AC			-	Magness Red 6-4, 6-6 & 6-2D battery	EI

General Comment:

wells served by current battery not colocated with battery and not inspected at this time. Spil 451508 was from removal of other production equipment at location.

LocationOverall Good: ☒**Signs/Marker:**

Type	BATTERY		
Comment:			
Corrective Action:		Date:	
Type	TANK LABELS/PLACARDS		
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	SEPARATOR		
Comment:			
Corrective Action:		Date:	
Type	TANK BATTERY		
Comment:			
Corrective Action:		Date:	

Equipment:

Type: Bird Protectors	# 2		corrective date
Comment:			
Corrective Action:		Date:	
Type: Horizontal Heated Separator	# 1		
Comment:	earthen berm		
Corrective Action:		Date:	
Type: Emission Control Device	# 1		
Comment:			
Corrective Action:		Date:	

Tanks and Berms:

Contents	#	Capacity	Type	Tank ID	SE GPS
PRODUCED WATER	1	OTHER	PBV FIBERGLASS		,
Comment:					

Corrective Action:		Date:	
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Paint

Condition		
Other (Content)		
Other (Capacity)	75bbl	
Other (Type)		

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Earth	Adequate	Walls Sufficent		Adequate
Comment:				
Corrective Action:				Date:

Contents	#	Capacity	Type	Tank ID	SE GPS
CRUDE OIL	1	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
Earth	Adequate	Walls Sufficent		Adequate
Comment:				
Corrective Action:				Date:

Venting:

Yes/No		
Comment:		
Corrective Action:		Date:

Flaring:

Type	
Comment:	
Corrective Action:	Date:

Inspected Facilities							
Facility ID:	451508	Type:	SPILL OR	API Number:	-	Status: AC	Insp. Status: EI
Facility ID:	451589	Type:	TANK	API Number:	-	Status: AC	Insp. Status: EI

Environmental**Spills/Releases:**

Type of Spill: PRODUCED WATER

Estimated Spill Volume: _____

Comment: spill dosicovered during removal of parly buried water vessel. Form 27 is required for removal of all buried and parly buried water vessels. Form 27 is required for site investigation and remediation of impacts to groundwater

Corrective Action: submit site investigation and remediation plan as part of closure of spill.

Date: 10/25/2017

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: _____