

**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:

10/18/2017

Submitted Date:

10/20/2017

Document Number:

680302597

**FIELD INSPECTION FORM**

Loc ID 394123 Inspector Name: SCHURE, KYM On-Site Inspection  2A Doc Num: \_\_\_\_\_

**Status Summary:**

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

**Operator Information:**

OGCC Operator Number: 18600  
Name of Operator: COLORADO INTERSTATE GAS COMPANY LLC  
Address: P O BOX 1087  
City: COLORADO State: CO Zip: 80944

**Findings:**

- 7 Number of Comments
- 0 Number of Corrective Actions
- Corrective Action Response Requested

**Contact Information:**

Contact Name	Phone	Email	Comment
Lively, Kevin	970-380-6011	kevin_lively@kindermorgan.com	

**Inspected Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
225524	WELL	AC	07/31/1968	STOW	087-05940	FORT MORGAN UNIT 1	AC

**General Comment:**

[Routine Site/Inventory Inspection](#)

Location			
<b>Lease Road:</b>			
Type	Access		
comment:	Two track		
Corrective Action:			Date:
Overall Good: <input type="checkbox"/>			
<b>Signs/Marker:</b>			
Type	WELLHEAD		
Comment:	Satisfactory		
Corrective Action:			Date:
<b>Emergency Contact Number:</b>			
Comment:	Satisfactory		
Corrective Action:			Date: _____
Overall Good: <input checked="" type="checkbox"/>			
<b>Spills:</b>			
Type	Area	Volume	
In Containment: No			
Comment:			
<input type="checkbox"/> Multiple Spills and Releases?			
<b>Fencing/:</b>			
Type	WELLHEAD		
Comment:	Security Chain Link		
Corrective Action:			Date:
<b>Equipment:</b>			
Type: Horizontal Separator	#		corrective date
Comment:			
Corrective Action:			Date:
Type: Gas Meter Run	# 1		
Comment:			
Corrective Action:			Date:
<b>Venting:</b>			
Yes/No			
Comment:			
Corrective Action:			Date:
<b>Flaring:</b>			
Type			
Comment:			
Corrective Action:			Date:

**Inspected Facilities**

Facility ID: 225524 Type: WELL API Number: 087-05940 Status: AC Insp. Status: AC

**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: [Continue BMP's for stormwater erosion management](#)

Corrective Action:

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

**Pits:**  NO SURFACE INDICATION OF PIT

**COGCC Comments**

Comment	User	Date
<a href="#">No problems observed</a>	schureky	10/20/2017