

**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:

04/11/2018

Submitted Date:

05/01/2018

Document Number:

680303214**FIELD INSPECTION FORM**
 Loc ID 313855 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:**4 Number of Comments0 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 |
|-------------|------|--------|-------------|------------|-----------|---------------------|-------------|
| 226432      | WELL | AC     | 05/11/1971  | STOW       | 087-07168 | FORT MORGAN UNIT 22 | SI          |

**General Comment:**[Bradenhead FIR](#)

**Location**Overall Good: ☒

Emergency Contact Number:

Comment: Satisfactory

Corrective Action:

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

Overall Good: ☒**Spills:**

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

In Containment: No

Comment:

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

corrective date

Type: Other

# 0

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:   | 226432 | Type: | WELL | API Number: | 087-07168 | Status: | AC | Insp. Status: | SI |
|  |        |       |      |             |           |         |    |               |    |
| BradenHead   |        |       |      |             |           |         |    |               |    |
|  |        |       |      |             |           |         |    |               |    |
| Comment: Instantaneous PSIG = 0 Prod. Casing = 1319 Surf. Casing = 1 |        |       |      |             |           |         |    |               |    |
| Corrective Action:   |        |       |      |             |           |         |    |               |    |
| Date:  |        |       |      |             |           |         |    |               |    |