

**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:

10/12/2018

Submitted Date:

10/16/2018

Document Number:

680304165

FIELD INSPECTION FORM

Loc ID 313825 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:

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

ANY CORRECTIVE ACTION(S) FROM PREVIOUS INSPECTIONS THAT HAVE NOT BEEN ADDRESSED ARE STILL APPLICABLE

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 |
|-------------|------|--------|-------------|------------|-----------|---------------------|-------------|
| 225516 | WELL | AC | 01/11/1965 | STOW | 087-05931 | FORT MORGAN UNIT 16 | SI |

General Comment:

[Bradenhead Insp.](#)

Location

| | | | |
|--------------------|--------------|--|-------|
| Lease Road: | | | |
| Type | Access | | |
| comment: | Satisfactory | | |
| Corrective Action: | | | Date: |

Overall Good:

| | | | |
|----------------------|--------------|--|-------|
| Signs/Marker: | | | |
| Type | WELLHEAD | | |
| Comment: | Satisfactory | | |
| Corrective Action: | | | Date: |

| | | | |
|----------------------------------|--------------|--|-------------|
| Emergency Contact Number: | | | |
| Comment: | Satisfactory | | |
| Corrective Action: | | | Date: _____ |

Overall Good:

| | | | | |
|----------------|------|--------|--|--|
| Spills: | | | | |
| Type | Area | Volume | | |

In Containment: No

Comment: _____

Multiple Spills and Releases?

| | | | |
|--------------------|---------------------|--|-------|
| Fencing/: | | | |
| Type | WELLHEAD | | |
| Comment: | Security chain link | | |
| Corrective Action: | | | Date: |

| | | | |
|--------------------|-----------|--|-----------------|
| Equipment: | | | corrective date |
| Type: Other | # 0 | | |
| Comment: | No change | | |
| Corrective Action: | | | Date: |

| | | | |
|--------------------|--|--|-------|
| Venting: | | | |
| Yes/No | | | |
| Comment: | | | |
| Corrective Action: | | | Date: |

| | | | |
|--------------------|--|--|-------|
| Flaring: | | | |
| Type | | | |
| Comment: | | | |
| Corrective Action: | | | Date: |

Inspected Facilities

Facility ID: 225516 Type: WELL API Number: 087-05931 Status: AC Insp. Status: SI

BradenHead

Comment: Tubing = 1734 psi. Prod. Casing = 104 psi. Surf. Casing = 10 psi. Instantaneous PSIG = 0

Corrective Action:

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 |
|------------------|-----------------|-------------------------|-----------------------|---------------|--------------------------|---------|
| Gravel | In Process | Other | In Process | | | |

Comment: [Use BMP's](#)

Corrective Action:

Date: _____

Pits: NO SURFACE INDICATION OF PIT