

**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:

04/01/2019

Submitted Date:

04/01/2019

Document Number:

690003199**FIELD INSPECTION FORM**

Loc ID 336065 Inspector Name: Carlile, Craig 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 Comments0 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                         |
|---------------|-------|-------------------------------|---------------------------------|
| , Inspections |       | COGCCinspections@Anadarko.com | <a href="#">All Inspections</a> |

**Inspected Facilities:**

| Facility ID | Type | Status | Status Date | Well Class | API Num   | Facility Name    | Insp Status |
|-------------|------|--------|-------------|------------|-----------|------------------|-------------|
| 285059      | WELL | SI     | 12/01/2018  | OW         | 123-23946 | RADEMACHER 15-25 | SI          |

**General Comment:**

**Location**Overall Good: ☒

|                      |          |       |  |
|----------------------|----------|-------|--|
| <b>Signs/Marker:</b> |          |       |  |
| Type                 | WELLHEAD |       |  |
| Comment:             |          |       |  |
| Corrective Action:   |          | Date: |  |

Emergency Contact Number:

Comment:

Corrective Action:  Date:

Overall Good: ☒

|                |      |        |  |  |  |
|----------------|------|--------|--|--|--|
| <b>Spills:</b> |      |        |  |  |  |
| Type           | Area | Volume |  |  |  |

In Containment: No

Comment: ☐ Multiple Spills and Releases?

|                    |           |       |  |
|--------------------|-----------|-------|--|
| <b>Fencing/:</b>   |           |       |  |
| Type               | WELLHEAD  |       |  |
| Comment:           | Chainlink |       |  |
| Corrective Action: |           | Date: |  |

|                    |     |       |                 |
|--------------------|-----|-------|-----------------|
| <b>Equipment:</b>  |     |       | corrective date |
| Type: Plunger Lift | # 1 |       |                 |
| 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             |  |       |  |
| Comment:           |  |       |  |
| Corrective Action: |  | Date: |  |

**Flaring:**

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

**Inspected Facilities**Facility ID: 285059 Type: WELL API Number: 123-23946 Status: SI Insp. Status: SI**Idle Well**Purpose: ☒ Shut In ☐ Temporarily Abandoned

Reminder: \_\_\_\_\_

Comment: Well shut in.

Corrective Action: \_\_\_\_\_

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

**COGCC Comments**

Comment

Routine inspection.

User

carlilec

Date

04/01/2019

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

| Document Num | Description | URL   |
|--------------|-------------|---|
| 690003200    | Photo       | <a href="http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4780353">http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4780353</a> |