

**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:

11/06/2020

Submitted Date:

11/10/2020

Document Number:

688308987

**FIELD INSPECTION FORM**

Loc ID 472992 Inspector Name: Sherman, Susan 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: 10720  
Name of Operator: KODA EXPLORATION LLC  
Address: 11799 WEST 18TH AVENUE  
City: LAKEWOOD State: CO Zip: 80215

**Findings:**

2 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
Elgerd, Anders	3039152555	elgerd@comcast.net	
Sullivan, Ryan	720 244 8049	rsullivantc@gmail.com	

**Inspected Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
472941	WELL	XX	03/10/2020		073-06774	Roaring Fork 14-28	DG

**General Comment:**

[BOP Inspection on Cartel Rig 15](#)

**Location**

Overall Good:

**Signs/Marker:**

Type	DRILLING/RECOMP		
Comment:	driller will put rig sign out		
Corrective Action:		Date:	

Emergency Contact Number:

Comment:	<input type="text"/>	Date:	
Corrective Action:	<input type="text"/>		

Overall Good:

**Spills:**

Type	Area	Volume		
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In Containment: No

Comment:

Multiple Spills and Releases?

**Equipment:**

Type: Flare	# 1		corrective date
Comment:			
Corrective Action:		Date:	
Type: Vertical Separator	# 1		
Comment:			
Corrective Action:		Date:	

**Venting:**

Yes/No			
Comment:			
Corrective Action:		Date:	

**Flaring:**

Type			
Comment:			
Corrective Action:		Date:	

**Inspected Facilities**

Facility ID: 472941 Type: WELL API Number: 073-06774 Status: XX Insp. Status: DG

**Well Drilling**

**Rig:** Rig Name: Cartel Rig 15 Pusher/Rig Manager: Shawn  
 Permit Posted: \_\_\_\_\_ Access Sign: \_\_\_\_\_

**Well Control Equipment:**

Pipe Ram: YES Blind Ram: \_\_\_\_\_ Hydril Type: YES  
 Pressure Test BOP: Pass Test Pressure PSI: \_\_\_\_\_ Safety Plan: \_\_\_\_\_

**Drill Fluids**

**Management:**

Lined Pit: NO Unlined Pit: YES Closed Loop: NO Semi-Closed Loop: NO  
 Multi-Well: NO Disposal Location: on location

Comment: \_\_\_\_\_

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

**Attached Documents**

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

Document Num	Description	URL
688308988	Koda Exploration Roaring Form 14-28 BOP	<a href="http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=5289014">http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=5289014</a>