

**FORM
INSP**Rev
X/20**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:

04/30/2024

Submitted Date:

04/30/2024

Document Number:

699505760**FIELD INSPECTION FORM**Loc ID 333171 Inspector Name: MEDINA, JUSTIN On-Site Inspection ☐ 2A Doc Num: _____**Operator Information:**ECMC Operator Number: 46290Name of Operator: KP KAUFFMAN COMPANY INCAddress: 1700 LINCOLN ST STE 4550City: DENVER State: CO Zip: 80203**Status Summary:**

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

Findings:5 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 |
|--------------|-------|---------------|---------------------------------|
| , KPK | | cogcc@kpk.com | All Inspections |

Inspected Facilities:

| Facility ID | Type | Status | Status Date | Well Class | API Num | Facility Name | Insp Status |
|-------------|------|--------|-------------|------------|-----------|---------------|-------------|
| 241909 | WELL | PR | 10/01/2023 | OW | 123-09700 | MOSER 1-A | PR |

General Comment:

| | | | | | |
|--|----------|---------------------|---------------------|-----------------|--------|
| Location | | | | | |
| Overall Good: <input checked="" type="checkbox"/> | | | | | |
| Emergency Contact Number: | | | | | |
| Comment: | | | | Date: _____ | |
| Corrective Action: | | | | | |
| Overall Good: <input checked="" type="checkbox"/> | | | | | |
| Spills: | | | | | |
| Type | Area | Volume | | | |
| In Containment: No | | | | | |
| Comment: | | | | | |
| <input type="checkbox"/> Multiple Spills and Releases? | | | | | |
| Equipment: | | | | corrective date | |
| Type: Bradenhead | # 1 | | | | |
| Comment: | | plumbed to surface | | | |
| Corrective Action: | | | | Date: | |
| Type: Pump Jack | # 1 | | | | |
| Comment: | | | | | |
| Corrective Action: | | | | Date: | |
| Type: Horizontal Heated Separator | # 1 | | | | |
| Comment: | | | | | |
| Corrective Action: | | | | Date: | |
| Type: Prime Mover | # 1 | | | | |
| Comment: | | gas motor | | | |
| Corrective Action: | | | | Date: | |
| Type: Bird Protectors | # 1 | | | | |
| Comment: | | | | | |
| Corrective Action: | | | | Date: | |
| Tanks and Berms: | | | | | |
| Contents | # | Capacity | Type | Tank ID | SE GPS |
| CRUDE OIL | 1 | 300 BBLS | STEEL AST | | , |
| Comment: | | | | | |
| Corrective Action: | | | | Date: | |
| Paint | | | | | |
| Condition | Adequate | | | | |
| Other (Content) | | | | | |
| Other (Capacity) | | | | | |
| Other (Type) | | | | | |
| Berms | | | | | |
| Type | Capacity | Permeability (Wall) | Permeability (Base) | Maintenance | |

| | | | | | |
|--------------------|----------|-----------------|-----------------|----------|-------|
| Earth | Adequate | Walls Sufficent | Base Sufficient | Adequate | |
| Comment: | | | | | |
| Corrective Action: | | | | | Date: |

Venting:

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

Flaring:

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

| | | | | | | | | | |
|--|----------------------------|---------|---|-------------|-------------|------------|----|---------------|----|
| Inspected Facilities | | | | | | | | | |
| Facility ID: | 241909 | Type: | WELL | API Number: | 123-09700 | Status: | PR | Insp. Status: | PR |
| Producing Well | | | | | | | | | |
| Comment: | pr | | | | | | | | |
| Corrective Action: | | | | | | Date: | | | |
| BradenHead | | | | | | | | | |
| Date of Last Brhd Test: | 10/24/2023 | | Annual Brhd Completed? | | Yes | | | | |
| Last Brhd Test Results | Initial Surf Csg Pressure: | | 0 | | Fluid Type: | | | | |
| | End Surf Csg Pressure: | | 0 | | | | | | |
| Comment: | | | | | | | | | |
| Corrective Action: | | | | | | Date: | | | |
| The subreport 'InspWellFlowline' could not be found at the specified location \\10.14.12 | | | | | | | | | |
| ECMC Comments | | | | | | | | | |
| Comment | | | User | | | Date | | | |
| This inspection does not nullify any orders or corrective actions from the ECMC | | medinaj | | | | 04/30/2024 | | | |
| At time of inspection weather conditions were clear, calm, warm. | | | | | | | | | |
| Attached Documents | | | | | | | | | |
| You can go to ECMC Images (https://ecmc.state.co.us/weblink/) and search by document number: | | | | | | | | | |
| Document Num | Description | | URL | | | | | | |
| 699505761 | inspection pictures | | http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=6537342 | | | | | | |