

**FORM
INSP**Rev
05/11

State of Colorado

Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203 Phone: (303) 894-2100 Fax: (303) 894-2109



| DE | ET | OE | ES |
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Inspection Date:

10/30/2013

Document Number:

663902325

Overall Inspection:

Satisfactory**FIELD INSPECTION FORM**

| | | | | |
|---------------------|-------------|--------|-----------------|--|
| Location Identifier | Facility ID | Loc ID | Inspector Name: | On-Site Inspection |
| | 319489 | 319489 | LONGWORTH, MIKE | <input type="checkbox"/> 2A Doc Num: _____ |

Operator Information:

OGCC Operator Number:

Name of Operator: KERR-MCGEE OIL & GAS ONSHORE LPAddress: P O BOX 173779City: DENVER State: CO Zip: 80217-

- ☐ THIS IS A FOLLOW UP INSPECTION
- ☐ FOLLOW UP INSPECTION REQUIRED
- ☐ NO FOLLOW UP INSPECTION REQUIRED
- ☐ INSPECTOR REQUESTS FORM 42 WHEN CORRECTIVE ACTIONS ARE COMPLETED

Contact Information:

| Contact Name | Phone | Email | Comment |
|-----------------|--------|-----------------------------|------------------------------------|
| Eikenberg, Cory | /10318 | cory.eikenberg@anadarko.com | Wattenberg North Prod'n Supervisor |

Compliance Summary:QtrQtr: NENW Sec: 21 Twp: 3N Range: 67W**Inspector Comment:****Related Facilities:**

| Facility ID | Type | Status | Status Date | Well Class | API Num | Facility Name | Insp Status | |
|-------------|------|--------|-------------|------------|-----------|----------------------------|-------------|-------------------------------------|
| 243559 | WELL | PR | 07/15/1984 | OW | 123-11351 | ALBERT D KURTZ GU C TRUE 1 | FR | <input checked="" type="checkbox"/> |
| 412971 | WELL | PR | 10/28/2010 | OW | 123-30578 | BURCHFIELD 30-21 | FR | <input checked="" type="checkbox"/> |
| 412972 | WELL | PR | 10/28/2010 | OW | 123-30579 | BURCHFIELD 21-21 | FR | <input checked="" type="checkbox"/> |

Equipment:**Location Inventory**

| | | | |
|---------------------------------|-------------------------|----------------------|----------------------------|
| Special Purpose Pits: _____ | Drilling Pits: <u>1</u> | Wells: <u>3</u> | Production Pits: _____ |
| Condensate Tanks: _____ | Water Tanks: <u>1</u> | Separators: <u>3</u> | Electric Motors: <u>77</u> |
| Gas or Diesel Mortors: <u>4</u> | Cavity Pumps: _____ | LACT Unit: _____ | Pump Jacks: _____ |
| Electric Generators: <u>3</u> | Gas Pipeline: <u>1</u> | Oil Pipeline: _____ | Water Pipeline: _____ |
| Gas Compressors: <u>1</u> | VOC Combustor: <u>1</u> | Oil Tanks: <u>3</u> | Dehydrator Units: _____ |
| Multi-Well Pits: _____ | Pigging Station: _____ | Flare: <u>1</u> | Fuel Tanks: <u>7</u> |

Location**Lease Road:**

| Type | Satisfactory/Unsatisfactory | comment | Corrective Action | Date |
|--------|-----------------------------|---------|-------------------|------|
| Access | Satisfactory | | | |

| Signs/Marker: | | | | |
|----------------------|-----------------------------|-------------------|-------------------|---------|
| Type | Satisfactory/Unsatisfactory | Comment | Corrective Action | CA Date |
| TANK LABELS/PLACARDS | Satisfactory | | | |
| WELLHEAD | Satisfactory | Sign need cleaned | | |
| BATTERY | Satisfactory | | | |

Emergency Contact Number: (S/U/V) Satisfactory Corrective Date: _____

Comment: _____

Corrective Action: _____

| Spills: | | | | |
|--|------|--------|-------------------|---------|
| Type | Area | Volume | Corrective action | CA Date |
| <input type="checkbox"/> Multiple Spills and Releases? | | | | |

| Fencing/: | | | | |
|------------------|-----------------------------|--|-------------------|---------|
| Type | Satisfactory/Unsatisfactory | Comment | Corrective Action | CA Date |
| SEPARATOR | Satisfactory | | | |
| WELLHEAD | Satisfactory | | | |
| TANK BATTERY | Satisfactory | Partially down for tank removal and replacement. | | |
| LOCATION | Satisfactory | Section of fence is down. Crews working to repair fencing. | | |

| Equipment: | | | | | |
|-----------------------------|---|-----------------------------|---------|-------------------|---------|
| Type | # | Satisfactory/Unsatisfactory | Comment | Corrective Action | CA Date |
| Bird Protectors | 3 | Satisfactory | | | |
| Gathering Line | | Satisfactory | | | |
| Horizontal Heated Separator | 2 | Satisfactory | | | |
| Plunger Lift | 3 | Satisfactory | | | |
| Gas Meter Run | 1 | Satisfactory | | | |

Inspector Name: LONGWORTH, MIKE

| | | | | |
|--------------------|---|-----------------------------------|----------------|--|
| Facilities: | | <input type="checkbox"/> New Tank | Tank ID: _____ | |
| Contents | # | Capacity | Type | SE GPS |
| | | | BV FIBERGLASS | , |
| S/U/V: | | | Comment: | Fiberglass tank has been removed. Earth work being done to reset new tank. |
| Corrective Action: | | | | Corrective Date: |

Paint

| | |
|-----------|--|
| Condition | |
|-----------|--|

Other (Content) _____

Other (Capacity) _____

Other (Type) _____

Berms

| | | | | |
|------|----------|---------------------|---------------------|-------------|
| Type | Capacity | Permeability (Wall) | Permeability (Base) | Maintenance |
| | | | | |

| | | | |
|-------------------|--|-----------------|--|
| Corrective Action | | Corrective Date | |
| Comment | | | |

| | | | | |
|--------------------|--------------|-----------------------------------|----------------|------------------|
| Facilities: | | <input type="checkbox"/> New Tank | Tank ID: _____ | |
| Contents | # | Capacity | Type | SE GPS |
| CRUDE OIL | 3 | 300 BBLS | STEEL AST | , |
| S/U/V: | Satisfactory | Comment: | | |
| Corrective Action: | | | | Corrective Date: |

Paint

| | |
|-----------|----------|
| Condition | Adequate |
|-----------|----------|

Other (Content) _____

Other (Capacity) _____

Other (Type) _____

Berms

| | | | | |
|-------|----------|---------------------|---------------------|-------------|
| Type | Capacity | Permeability (Wall) | Permeability (Base) | Maintenance |
| Metal | Adequate | Walls Sufficient | Base Sufficient | Adequate |

| | | | |
|-------------------|--|-----------------|--|
| Corrective Action | | Corrective Date | |
| Comment | | | |

| | | |
|-----------------|---------|--|
| Venting: | | |
| Yes/No | Comment | |
| | | |

| | | | | |
|-----------------|-----------------------------|---------|-------------------|---------|
| Flaring: | | | | |
| Type | Satisfactory/Unsatisfactory | Comment | Corrective Action | CA Date |
| Field Flare | Satisfactory | | | |

| | | | | |
|--------------------------|--|-------|-----------------|--|
| <u>Predrill</u> | | | | |
| Location ID: 319489 | | | | |
| Site Preparation: | | | | |
| Lease Road Adeq.: | | Pads: | Soil Stockpile: | |
| S/U/V: _____ | | | | |

Corrective Action: _____

Date: _____

CDP Num.: _____

Form 2A COAs:**S/U/V:** _____ **Comment:** _____**CA:** _____**Date:** _____**Wildlife BMPs:**

| BMP Type | Comment |
|---------------|---|
| PROPOSED BMPs | <p>Anadarko Petroleum Corporation</p> <p>Stormwater Management Program</p> <p>Copies of both stormwater management plans are kept at our field office in Evans and our region office in Denver along with a copy at the Colorado Oil and Gas Conservation Commission and are available for inspection.</p> <p>Anadarko has prepared two stormwater management plans to ensure our compliance with COGCC and CDPHE stormwater management requirements. The CDPHE stormwater management plan covers construction activities while the COGCC plan covers post construction activities. In order to be in compliance with the stormwater regulations, it is necessary for sediment containment systems to be utilized at our sites. Sediment containment systems consist of best management practices (BMP's) such as silt fencing, straw bales, erosion control blankets, continuous berms etc. A combination of BMP's may be used at any given site. Anadarko strives to use BMP's that are least intrusive, yet provide the required sediment control and surface water protection. The sediment controls used are determined at the time of construction.</p> |

S/U/V: _____ **Comment:** _____**CA:** _____**Date:** _____**Stormwater:****Comment:** _____**Staking:** _____**On Site Inspection (305):**Surface Owner Contact Information:

Name: _____

Address: _____

Phone Number: _____

Cell Phone: _____

Operator Rep. Contact Information:

Inspector Name: LONGWORTH, MIKE

| | |
|--|---|
| Landman Name: _____ | Phone Number: _____ |
| Date Onsite Request Received: _____ | Date of Rule 306 Consultation: _____ |
| Request LGD Attendance: _____ | |
| <u>LGD Contact Information:</u> | |
| Name: _____ | Phone Number: _____ Agreed to Attend: _____ |
| <u>Summary of Landowner Issues:</u> | |
| | |
| <u>Summary of Operator Response to Landowner Issues:</u> | |
| | |
| <u>Onsite Inspection Memorandum Summarizing Discussions at Inspection as Attachment:</u> | |
| | |

Facility

Facility ID: 243559 Type: WELL API Number: 123-11351 Status: PR Insp. Status: FR

Idle Well

Purpose: ☒ Shut In ☐ Temporarily Abandoned Reminder: _____
S/V: Satisfactory CA Date: _____
CA: _____
Comment: Shut in at separator

Facility ID: 412971 Type: WELL API Number: 123-30578 Status: PR Insp. Status: FR

Idle Well

Purpose: ☒ Shut In ☐ Temporarily Abandoned Reminder: _____
S/V: Satisfactory CA Date: _____
CA: _____
Comment: Shut in at separator

Facility ID: 412972 Type: WELL API Number: 123-30579 Status: PR Insp. Status: FR

Idle Well

Purpose: ☒ Shut In ☐ Temporarily Abandoned Reminder: _____
S/V: Satisfactory CA Date: _____
CA: _____
Comment: Shut in at separator

Environmental

Spills/Releases:

Type of Spill: _____ Description: _____ Estimated Spill Volume: _____
Comment: _____
Corrective Action: _____ Date: _____
Reportable: _____ GPS: Lat _____ Long _____
Proximity to Surface Water: _____ Depth to Ground Water: _____

Water Well:

DWR Receipt Num: _____ Owner Name: _____ GPS : _____ Lat _____ Long _____

Field Parameters:

Sample Location: _____

Emission Control Burner (ECB): _____

Comment: _____

Pilot: _____ Wildlife Protection Devices (fired vessels): _____

Reclamation - Storm Water - Pit**Interim Reclamation:**

Date Interim Reclamation Started: _____ Date Interim Reclamation Completed: _____

Land Use: DRY LAND

Comment: _____

1003a. Debris removed? _____ CM _____
 CA _____ CA Date _____
 Waste Material Onsite? _____ CM _____
 CA _____ CA Date _____
 Unused or unneeded equipment onsite? _____ CM _____
 CA _____ CA Date _____
 Pit, cellars, rat holes and other bores closed? _____ CM _____
 CA _____ CA Date _____
 Guy line anchors removed? _____ CM _____
 CA _____ CA Date _____
 Guy line anchors marked? _____ CM _____
 CA _____ CA Date _____

1003b. Area no longer in use? _____ Production areas stabilized ? _____

1003c. Compacted areas have been cross ripped? _____

1003d. Drilling pit closed? _____ Subsidence over on drill pit? _____

Cuttings management: _____

1003e. Areas no longer needed for drilling or subsequent operations for have been re-vegetated to 80% of pre-existing? _____

Production areas have been stabilized? _____ Segregated soils have been replaced? _____

RESTORATION AND REVEGETATIONCropland

Top soil replaced _____ Recontoured _____ Perennial forage re-established _____

Non-Cropland

Top soil replaced _____ Recontoured _____ 80% Revegetation _____

1003 f. Weeds Noxious weeds? _____

Comment: _____

Overall Interim Reclamation _____

Final Reclamation/ Abandoned Location:

Inspector Name: LONGWORTH, MIKE

Date Final Reclamation Started: _____

Date Final Reclamation Completed: _____

Final Land Use: DRY LAND

Reminder: _____

Comment: _____

Well plugged _____

Pit mouse/rat holes, cellars backfilled _____

Debris removed _____

No disturbance /Location never built _____

Access Roads Regraded _____

Contoured _____

Culverts removed _____

Gravel removed _____

Location and associated production facilities reclaimed _____

Locations, facilities, roads, recontoured _____

Compaction alleviation _____

Dust and erosion control _____

Non cropland: Revegetated 80% _____

Cropland: perennial forage _____

Weeds present _____

Subsidence _____

Comment: _____

Corrective Action: _____

Date _____

Overall Final Reclamation

Well Release on Active Location ☐

Multi-Well Location ☐

Storm Water:

| Loc Erosion BMPs | BMP Maintenance | Lease Road Erosion BMPs | Lease BMP Maintenance | Chemical BMPs | Chemical BMP Maintenance | Comment |
|------------------|-----------------|-------------------------|-----------------------|---------------|--------------------------|---------|
| | | | | | | |

S/U/V: _____

Corrective Date: _____

Comment: _____

CA: _____

Pits: ☐ NO SURFACE INDICATION OF PIT