

**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:

07/10/2012

Document Number:

663800426

Overall Inspection:

Satisfactory**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Tracking Type	Inspector Name:
	<u>293862</u>	<u>334365</u>		<u>LONGWORTH, MIKE</u>

Operator Information:OGCC Operator Number: 100322 Name of Operator: NOBLE ENERGY INCAddress: 1625 BROADWAY STE 2200City: DENVERState: COZip: 80202**Contact Information:**

Contact Name	Phone	Email	Comment
Bruner, Ryan	(303) 228-4158	rbruner@nobleenergyinc.com	Enviromental

Compliance Summary:

QtrQtr: NWNE		Sec: 35	Twp: 7S		Range: 96W		
Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Unsatisfactory	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
08/05/2011	200317211	PR	PR	S			N
03/30/2010	200240110	PR	WO	S			N
09/19/2009	200222090	CO	WO	S			N
09/19/2009	200218744	CO	WO	U			Y

Inspector Comment:**Related Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	
293862	WELL	PR	11/18/2009	GW	045-15145	PARACHUTE RANCH FED. 35 -41B	<input checked="" type="checkbox"/>
293863	WELL	PR	12/14/2009	OW	045-15146	PARACHUTE RANCH FED 35-42B	<input checked="" type="checkbox"/>
293864	WELL	IJ	09/16/2010	DSPW	045-15147	PARACHUTE RANCH FED. 35 -31C	<input type="checkbox"/>
293865	WELL	PR	12/23/2009	OW	045-15148	PARACHUTE RANCH FED. 35 -41D	<input checked="" type="checkbox"/>
293866	WELL	PR	12/24/2009	OW	045-15149	PARACHUTE RANCH FED 35-42A	<input checked="" type="checkbox"/>
293867	WELL	PR	01/24/2010	OW	045-15150	PARACHUTE RANCH FED. 35 -31D	<input checked="" type="checkbox"/>
293868	WELL	PR	04/01/2012	GW	045-15151	PARACHUTE RANCH FED. 35 -32C	<input checked="" type="checkbox"/>
293869	WELL	PR	01/21/2011	OW	045-15152	PARACHUTE RANCH FED. 35 -32B	<input checked="" type="checkbox"/>
293870	WELL	PR	01/01/2010	OW	045-15153	PARACHUTE RANCH FED. 35 -32A	<input checked="" type="checkbox"/>
293871	WELL	PR	11/16/2009	GW	045-15154	PARACHUTE RANCH FED. 35 -41C	<input checked="" type="checkbox"/>

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294767	WELL	PR	01/25/2010	OW	045-15591	PARACHUTE RANCH FED. 35 -31B	<input checked="" type="checkbox"/>
294768	WELL	PR	11/21/2009	GW	045-15592	PARACHUTE RANCH FED. 35 -31A	<input checked="" type="checkbox"/>
294769	WELL	PR	12/01/2009	GW	045-15593	PARACHUTE RANCH FED. 35 -41A	<input checked="" type="checkbox"/>

Equipment:Location Inventory

Special Purpose Pits: _____	Drilling Pits: _____	Wells: _____	Production Pits: _____
Condensate Tanks: _____	Water Tanks: _____	Separators: _____	Electric Motors: _____
Gas or Diesel Mortors: _____	Cavity Pumps: _____	LACT Unit: _____	Pump Jacks: _____
Electric Generators: _____	Gas Pipeline: _____	Oil Pipeline: _____	Water Pipeline: _____
Gas Compressors: _____	VOC Combustor: _____	Oil Tanks: _____	Dehydrator Units: _____
Multi-Well Pits: _____	Pigging Station: _____	Flare: _____	Fuel Tanks: _____

Location**Lease Road:**

Type	Satisfactory/Unsatisfactory	comment	Corrective Action	Date
Access	Satisfactory			

Signs/Marker:

Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
WELLHEAD	Satisfactory			
TANK LABELS/PLACARDS	Satisfactory			
BATTERY	Satisfactory			
CONTAINERS	Satisfactory			

Emergency Contact Number: (S/U/V) Satisfactory

Corrective Date: _____

Comment: _____

Corrective Action: _____

Good Housekeeping:

Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
TRASH	Satisfactory			

Spills:

Type	Area	Volume	Corrective action	CA Date
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☐ Multiple Spills and Releases?**Fencing/:**

Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
TANK BATTERY	Satisfactory			
WELLHEAD	Satisfactory			
LOCATION	Satisfactory			
SEPARATOR	Satisfactory			

Equipment:					
Type	#	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date

Venting:			
Yes/No	Comment		

Flaring:				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date

Predrill

Location ID: 334365

Site Preparation:

Lease Road Adeq.: _____

Pads: _____

Soil Stockpile: _____

Corrective Action: _____

Date: _____ CDP Num.: _____

Form 2A COAs:**Comment:****CA:****Date:****Wildlife BMPs:****Comment:****CA:****Date:****Stormwater:**

Erosion BMPs

Present

Other BMPs

Present

Corrective Action: _____ Date: _____

Comments: Erosion BMPs: _____

Other BMPs: _____

Comment:**Staking:****On Site Inspection (305):****Surface Owner Contact Information:**

Name: _____

Address: _____

Phone Number: _____

Cell Phone: _____

Operator Rep. Contact Information:

Landman Name: _____

Phone Number: _____

Date Onsite Request Received: _____

Date of Rule 306 Consultation: _____

Request LGD Attendance: _____

LGD Contact Information:

Name: _____ Phone Number: _____ Agreed to Attend: _____

Summary of Landowner Issues:**Summary of Operator Response to Landowner Issues:****Onsite Inspection Memorandum Summarizing Discussions at Inspection as Attachment:****Facility**

Facility ID: 293862 Type: WELL API Number: 045-15145 Status: PR Insp. Status: PR

Producing Well**Comment:**

Facility ID: 293863 Type: WELL API Number: 045-15146 Status: PR Insp. Status: PR

Producing WellComment: Facility ID: 293865 Type: WELL API Number: 045-15148 Status: PR Insp. Status: PR**Producing Well**Comment: Facility ID: 293866 Type: WELL API Number: 045-15149 Status: PR Insp. Status: PR**Producing Well**Comment: Facility ID: 293867 Type: WELL API Number: 045-15150 Status: PR Insp. Status: PR**Producing Well**Comment: Facility ID: 293868 Type: WELL API Number: 045-15151 Status: PR Insp. Status: PR**Producing Well**Comment: Facility ID: 293869 Type: WELL API Number: 045-15152 Status: PR Insp. Status: PR**Producing Well**Comment: Facility ID: 293870 Type: WELL API Number: 045-15153 Status: PR Insp. Status: PR**Producing Well**Comment: Facility ID: 293871 Type: WELL API Number: 045-15154 Status: PR Insp. Status: PR**Producing Well**Comment: Facility ID: 294767 Type: WELL API Number: 045-15591 Status: PR Insp. Status: PR**Producing Well**Comment: Facility ID: 294768 Type: WELL API Number: 045-15592 Status: PR Insp. Status: PR**Producing Well**Comment: Facility ID: 294769 Type: WELL API Number: 045-15593 Status: PR Insp. Status: PR**Producing Well**Comment: **Environmental****Spills/Releases:**

Type of Spill: _____ Description: _____ Estimated Spill Volume: _____

Inspector Name: LONGWORTH, MIKE

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: _____

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 REVEGETATION

Cropland

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

Inspector Name: LONGWORTH, MIKE

Non-Cropland

Top soil replaced _____

Recontoured _____

80% Revegetation _____

1003 f. Weeds Noxious weeds? _____

Comment: _____

Overall Interim Reclamation _____

Final Reclamation/ Abandoned Location:

Date Final Reclamation Started: _____

Date Final Reclamation Completed: _____

Final Land Use: _____

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

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: _____