

**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



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| DE | ET | OE | ES |
|----|----|----|----|

Inspection Date:

08/17/2012

Document Number:

663400772

Overall Inspection:

Satisfactory**FIELD INSPECTION FORM**

| | | | | |
|---------------------|---------------|---------------|---------------|----------------------|
| Location Identifier | Facility ID | Loc ID | Tracking Type | Inspector Name: |
| | <u>415960</u> | <u>415960</u> | | <u>EDELEN, RANDY</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 |
|-----------------|----------------|-----------------------------|---------|
| Pavelka, Linda | (303) 228-4064 | LPavelka@nobleenergyinc.com | |
| DERANLEAU, GREG | | greg.deranleau@state.co.us | |

Compliance Summary:QtrQtr: SWNW Sec: 32 Twp: 3N Range: 65W**Inspector Comment:**

Shared facilities without a location id

Related Facilities:

| Facility ID | Type | Status | Status Date | Well Class | API Num | Facility Name |
|-------------|------|--------|-------------|------------|-----------|------------------|
| 416053 | WELL | PR | 05/10/2012 | | 123-31244 | MCGUCKIN H 32-31 |

Equipment:**Location Inventory**

| | | | |
|-----------------------------|------------------------|---------------------|-------------------------|
| Special Purpose Pits: _____ | Drilling Pits: _____ | Wells: <u>1</u> | Production Pits: _____ |
| Condensate Tanks: _____ | Water Tanks: _____ | Separators: _____ | Electric Motors: _____ |
| Gas or Diesel Motors: _____ | Cavity Pumps: _____ | LACT Unit: _____ | Pump Jacks: _____ |
| Electric Generators: _____ | Gas Pipeline: <u>1</u> | 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 |
| BATTERY | Satisfactory | McGuckin H 32-3 McGuckin H 32-5 McGuckin H 32-6 McGuckin H 32-2J McGuckin H 32-4D McGuckin H 32-31 McGuckin H 32-32 | | |
| TANK LABELS/PLACARDS | Satisfactory | McGuckin H 32-3 McGuckin H 32-5 McGuckin H 32-6 McGuckin H 32-2J McGuckin H 32-4D McGuckin H 32-31 McGuckin H 32-32 | | |

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

Comment: Previously verified

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 |
| | Satisfactory | McGuckin H 32-3 McGuckin H 32-5 McGuckin H 32-6 McGuckin H 32-2J McGuckin H 32-4D McGuckin H 32-31 McGuckin H 32-32 | | |

| Equipment: | | | | | |
|-----------------------------|---|-----------------------------|---|-------------------|---------|
| Type | # | Satisfactory/Unsatisfactory | Comment | Corrective Action | CA Date |
| Emission Control Device | 1 | Satisfactory | McGuckin H 32-3 McGuckin H 32-5 McGuckin H 32-6 McGuckin H 32-2J McGuckin H 32-4D McGuckin H 32-31 McGuckin H 32-32 | | |
| Horizontal Heated Separator | 4 | Satisfactory | McGuckin H 32-3 McGuckin H 32-5 McGuckin H 32-6 McGuckin H 32-2J McGuckin H 32-4D McGuckin H 32-31 McGuckin H 32-32 | | |

Inspector Name: EDELEN, RANDY

| | | | | | |
|-----------------|---|--------------|---|--|--|
| Gas Meter Run | 4 | Satisfactory | McGuckin H 32-3 McGuckin H 32-5 McGuckin H 32-6 McGuckin H 32-2 JMcGuckin H 32-4 DMcGuckin H 32-31 McGuckin H 32-32 | | |
| Bird Protectors | 5 | Satisfactory | McGuckin H 32-3 McGuckin H 32-5 McGuckin H 32-6 McGuckin H 32-2 JMcGuckin H 32-4 DMcGuckin H 32-31 McGuckin H 32-32 | | |

Facilities:

☐ New Tank

Tank ID: _____

| Contents | # | Capacity | Type | SE GPS |
|----------------|---|-----------|------|--------|
| PRODUCED WATER | 4 | <100 BBLS | | , |

| | | |
|--------|----------|-------------|
| S/U/V: | Comment: | Not painted |
|--------|----------|-------------|

| | |
|--------------------|------------------|
| Corrective Action: | Corrective Date: |
|--------------------|------------------|

Paint

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

Other (Content) _____

Other (Capacity) 60 bbl

Other (Type) _____

Berms

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

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

| | |
|---------|--|
| Comment | See steel tank for inspection of common berm |
|---------|--|

Facilities:

☐ New Tank

Tank ID: _____

| Contents | # | Capacity | Type | SE GPS |
|-----------|---|----------|-----------|-----------------------|
| CRUDE OIL | 4 | 300 BBLS | STEEL AST | 40.185840,-104.696160 |

| | | |
|--------|--------------|----------|
| 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 |
|-------|----------|---------------------|---------------------|-------------|
| Other | Adequate | Walls Sufficent | Base Sufficent | Adequate |

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

| | |
|---------|------------------------|
| Comment | Polymer walls and base |
|---------|------------------------|

Inspector Name: EDELEN, RANDY

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

| | | | | |
|-------------------|-----------------------------|---------|-------------------|---------|
| Flaring: | | | | |
| Type | Satisfactory/Unsatisfactory | Comment | Corrective Action | CA Date |
| Ignitor/Combustor | Satisfactory | | | |

Predrill

Location ID: 415960

Site Preparation:

Lease Road Adeq.: _____

Pads: _____

Soil Stockpile: _____

Corrective Action: _____

Date: _____ CDP Num.: _____

Form 2A COAs:

| Group | User | Comment | Date |
|--------|---------|---|------------|
| Agency | caplank | Location is in a sensitive area because of shallow groundwater; therefore, either a lined drilling pit or closed loop system is required. | 02/11/2010 |

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:**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:

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

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: RANGELAND

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 ? Pass

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? Pass

Segregated soils have been replaced? _____

RESTORATION AND REVEGETATIONCropland

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

Non-Cropland

Inspector Name: EDELEN, RANDY

Top soil replaced _____

Recontoured _____

80% Revegetation _____

1003 f. Weeds Noxious weeds? _____ P _____

Comment: _____

Overall Interim Reclamation Pass

Final Reclamation/ Abandoned Location:

Date Final Reclamation Started: _____

Date Final Reclamation Completed: _____

Final Land Use: RANGELAND

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

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: Satisfactory Corrective Date: _____

Comment: _____

CA: _____