

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:
10/09/2012

Document Number:
668700313

Overall Inspection:
Satisfactory

FIELD INSPECTION FORM

| | | | | |
|---------------------|---------------|---------------|---------------|--|
| Location Identifier | Facility ID | Loc ID | Tracking Type | Inspector Name: <u>HELGELAND, GARY</u> |
| | <u>245600</u> | <u>323704</u> | | |

Operator Information:

| | |
|--|---|
| OGCC Operator Number: <u>100322</u> | Name of Operator: <u>NOBLE ENERGY INC</u> |
| Address: <u>1625 BROADWAY STE 2200</u> | |
| City: <u>DENVER</u> | State: <u>CO</u> Zip: <u>80202</u> |

Contact Information:

| Contact Name | Phone | Email | Comment |
|-----------------|--------------|-----------------------------|--------------------|
| PAVELKA , LINDA | 303-228-4060 | lpavelka@nobleenergyinc.com | REGULATORY ANALYST |

Compliance Summary:

| | | | |
|---------------------|----------------|----------------|-------------------|
| QtrQtr: <u>SWSE</u> | Sec: <u>31</u> | Twp: <u>5N</u> | Range: <u>64W</u> |
|---------------------|----------------|----------------|-------------------|

| Insp. Date | Doc Num | Insp. Type | Insp Status | Satisfactory /Unsatisfactory | PA P/F/I | Pas/Fail (P/F) | Violation (Y/N) |
|------------|-----------|------------|-------------|------------------------------|----------|----------------|-----------------|
| 03/31/1995 | 500169835 | PR | PR | | | | |

Inspector Comment:

Related Facilities:

| Facility ID | Type | Status | Status Date | Well Class | API Num | Facility Name |
|-------------|------|--------|-------------|------------|-----------|---|
| 245600 | WELL | PR | 03/07/2012 | OW | 123-13395 | OCOMA UPRR LEASE B31-15 <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

| | |
|--|------------------------|
| Emergency Contact Number: <u>(S/U/V)</u> _____ | Corrective Date: _____ |
| Comment: _____ | |
| Corrective Action: _____ | |

Spills:

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

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

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

Predrill

Location ID: 323704

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: <u>245600</u> | Type: <u>WELL</u> | API Number: <u>123-13395</u> | Status: <u>PR</u> | Insp. Status: <u>PR</u> |

| Environmental | | |
|---|------------------------------|-------------------------------|
| Spills/Releases: | | |
| Type of Spill: _____ | Description: _____ | Estimated Spill Volume: _____ |
| Comment: <input style="width:100%;" type="text"/> | | |
| 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: |
| <input style="width:100%;" type="text"/> |
| Sample Location: <input style="width:100%;" type="text"/> |

| |
|---|
| 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: <input style="width:100%;" type="text"/> | |
| 1003a. Debris removed? <u>Pass</u> CM _____ | |
| CA _____ | CA Date _____ |
| Waste Material Onsite? <u>Pass</u> CM _____ | |
| CA _____ | CA Date _____ |
| Unused or unneeded equipment onsite? <u>Pass</u> CM _____ | |
| CA _____ | CA Date _____ |
| Pit, cellars, rat holes and other bores closed? <u>Pass</u> CM _____ | |
| CA _____ | CA Date _____ |
| Guy line anchors removed? <u>Pass</u> CM _____ | |
| CA _____ | CA Date _____ |
| Guy line anchors marked? _____ CM _____ | |
| CA _____ | CA Date _____ |
| 1003b. Area no longer in use? <u>Pass</u> | Production areas stabilized ? <u>Pass</u> |
| 1003c. Compacted areas have been cross ripped? <u>Pass</u> | |
| 1003d. Drilling pit closed? <u>Pass</u> | Subsidence over on drill pit? <u>Pass</u> |

Cuttings management: _____

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

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

RESTORATION AND REVEGETATION

Cropland

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

Non-Cropland

Top soil replaced Pass Recontoured Pass 80% Revegetation Pass

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: _____

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: