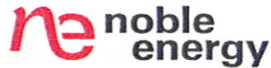


1625 Broadway  
Suite 2200.  
Denver, CO 80202

Tel: 303.228.4000  
Fax: 303.228.4286

www.nobleenergyinc.com



North America Division

October 12, 2012

Mr. Alex Fischer  
Department Of Natural Resources  
Oil & Gas Conservation Commission  
1120 Lincoln St., Suite 801  
Denver CO 80203-2136

RE: Form 19 and Site Map  
Donaldson USX EE 29-06D  
API 05-123-33669  
SWNW Sec. 29, T7N, R65W  
Weld County, Colorado

Dear Mr. Fischer:

Please find attached a completed form 19 and site map for the Donaldson USX EE 29-06D tank battery. Noble Energy Inc. would like to claim business confidentiality protection for the information submitted in this letter, the supporting materials attached and all previous and subsequent correspondence related to this matter. Please contact the Noble Energy Environmental Department at (303) 228-4000 if you have any questions or require additional information.

Sincerely,

A handwritten signature in blue ink, appearing to read 'Jacob Evans', with a long horizontal flourish extending to the right.

Jacob Evans  
Senior Environmental Specialist

Attachments

State of Colorado  
**Oil and Gas Conservation Commission**

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



FOR OGCC USE ONLY

**RECEIVED**  
**12/1/2012**

Spill report taken by:

FACILITY ID:  
**306408**

**SPILL/RELEASE REPORT**

This form is to be submitted by the party responsible for the oil and gas spill or release. Any spill or release which may impact waters of the State must be reported as soon as practicable; any spill over 20 bbls must be reported within 24 hours and all spills over five bbls must be reported within ten days. Submit a Site Investigation and Remediation Workplan (Form 27) when requested by the Director.

**OPERATOR INFORMATION**

Name of Operator: _____ OGCC Operator No: _____	Phone Numbers No: _____ Fax: _____ E-Mail: _____
Address: _____	
City: _____ State: _____ Zip: _____	
Contact Person: _____	

**DESCRIPTION OF SPILL OR RELEASE**

Date of Incident: _____ Facility Name & No.: _____	County: _____
Type of Facility (well, tank battery, flow line, pit): _____	QtrQtr: _____ Section: _____
Well Name and Number: _____	Township: _____ Range: _____
API Number: _____	Meridian: _____
Specify volume spilled and recovered (in bbls) for the following materials: Oil spilled: _____ Oil recov'd: _____ Water spilled: _____ Water recov'd: _____ Other spilled: _____ Other recov'd: _____	
Ground Water impacted? Yes No	Surface Water impacted? Yes No
Contained within berm? Yes No	Area and vertical extent of spill: _____x_____
Current land use: _____ Weather conditions: _____	
Soil/geology description: _____	
<b>IF LESS THAN A MILE</b> , report distance <b>IN FEET</b> to nearest.... Surface water: _____ wetlands: _____ buildings: _____	
Livestock: _____ water wells: _____ Depth to shallowest ground water: _____	
Cause of spill (e.g., equipment failure, human error, etc.): _____ Detailed description of the spill/release incident: _____	

**CORRECTIVE ACTION**

Describe immediate response (how stopped, contained and recovered):

Describe any emergency pits constructed:

How was the extent of contamination determined:

Further remediation activities proposed (attach separate sheet if needed):

Describe measures taken to prevent problem from reoccurring:

**OTHER NOTIFICATIONS**

List the parties and agencies notified (County, BLM, EPA, DOT, Local Emergency Planning Coordinator or other).

Date	Agency	Contact	Phone	Response

Spill/Release Tracking No: **2231293**



DONALDSON USX EE29-06D, 12D; 2059-USX EE  
29-5; CALVARY USX EE 29-19, 03D  
SWNW T7N R65W SEC29



NORTH

CALVARY USX EE29-04D DONALDSON USX EE29-12D  
123-33674 DONALDSON USX EE29-06D  
CALVARY USX EE29-03D 123-33673

123-24508  
CALVARY-USX EE 29-19

RELEASE

123-25251  
2059-USX EE 29-5