

FORM INSP Rev 05/11	State of Colorado Oil and Gas Conservation Commission <small>1120 Lincoln Street, Suite 801, Denver, Colorado 80203 Phone: (303) 894-2100 Fax: (303) 894-2109</small>		DE	ET	OE	ES
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Inspection Date:
01/14/2013

Document Number:
663800688

Overall Inspection:
Satisfactory

FIELD INSPECTION FORM

Location Identifier	Facility ID	Loc ID	Tracking Type	Inspector Name: <u>LONGWORTH, MIKE</u>
	<u>306</u>	<u>334183</u>		

Operator Information:

OGCC Operator Number: 100322 Name of Operator: NOBLE ENERGY INC

Address: 1625 BROADWAY STE 2200

City: DENVER State: CO Zip: 80202

Contact Information:

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

Compliance Summary:

QtrQtr: NWNE Sec: 3 Twp: 8S Range: 96W

Inspector Comment:

Related Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	
306	WELL	PR	03/02/2010	GW	045-15478	PRATHER/LATHAM 3-31A	<input checked="" type="checkbox"/>
307	WELL	PR	04/14/2010	GW	045-15479	MANESS 3-31D	<input checked="" type="checkbox"/>
308	WELL	PR	03/01/2010	GW	045-15480	MANESS 3-31B	<input checked="" type="checkbox"/>
309	WELL	PR	03/11/2010	GW	045-15481	MANESS 3-31C	<input checked="" type="checkbox"/>
310	WELL	PR	04/01/2010	GW	045-15482	PRATHER/LATHAM 3-21B	<input checked="" type="checkbox"/>
311	WELL	PR	03/31/2010	GW	045-15483	MANESS 3-21C	<input checked="" type="checkbox"/>
312	WELL	PR	04/13/2010	GW	045-15484	MANESS 3-21D	<input checked="" type="checkbox"/>
313	WELL	PR	03/10/2010	GW	045-15485	PRATHER/LATHAM 3-21A	<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	Snow packed		

Signs/Marker:				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
WELLHEAD	Satisfactory			
BATTERY	Satisfactory			
CONTAINERS	Satisfactory			
TANK LABELS/PLACARDS	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
<input type="checkbox"/> Multiple Spills and Releases?				

Fencing/:				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
SEPARATOR	Satisfactory			
LOCATION	Satisfactory	Locked gate		
TANK BATTERY	Satisfactory			
WELLHEAD	Satisfactory			

Equipment:					
Type	#	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
Plunger Lift	8	Satisfactory			
Horizontal Heated Separator	8	Satisfactory	2 quads		
Bird Protectors	4	Satisfactory			

Facilities:		<input type="checkbox"/> New Tank	Tank ID: _____		
Contents	#	Capacity	Type	SE GPS	
CONDENSATE	5	300 BBLS	STEEL AST	39.383450,108.091240	
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	

Predrill

Location ID: 334183

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: 306 Type: WELL API Number: 045-15478 Status: PR Insp. Status: PR

Producing Well

Comment: Plunger Lift

Facility ID: 307 Type: WELL API Number: 045-15479 Status: PR Insp. Status: PR

Producing Well

Comment:

Facility ID: 308 Type: WELL API Number: 045-15480 Status: PR Insp. Status: PR

Producing Well

Comment:

Facility ID: 309 Type: WELL API Number: 045-15481 Status: PR Insp. Status: PR

Producing Well

Comment:

Facility ID: 310 Type: WELL API Number: 045-15482 Status: PR Insp. Status: PR

Producing Well

Comment:

Facility ID: 311 Type: WELL API Number: 045-15483 Status: PR Insp. Status: PR

Producing Well

Comment:

Facility ID: 312 Type: WELL API Number: 045-15484 Status: PR Insp. Status: PR

Producing Well

Comment:

Facility ID: 313 Type: WELL API Number: 045-15485 Status: PR Insp. Status: PR

Producing Well

Comment:

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: _____

Comment: _____

- 1003a. Debris removed? Pass CM _____ CA _____ CA Date _____
Waste Material Onsite? Pass CM _____ CA _____ CA Date _____
Unused or unneeded equipment onsite? Pass CM _____ CA _____ CA Date _____
Pit, cellars, rat holes and other bores closed? Pass 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? In _____ Production areas stabilized? Pass _____

1003c. Compacted areas have been cross ripped? In _____

1003d. Drilling pit closed? Pass _____ 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 _____

Non-Cropland

Top soil replaced _____ Recontoured _____ 80% Revegetation _____

1003 f. Weeds Noxious weeds? P _____

Comment: _____

Overall Interim Reclamation In Process _____

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 _____

Inspector Name: LONGWORTH, MIKE

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
Waddles	Pass	Gravel	Pass			
Seeding						
Berms	Pass	Berms	Pass			
Compaction	Pass	Compaction	Pass			
Retention Ponds	Pass	Ditches	Pass			
Gravel	Pass	Culverts	Pass			
Ditches	Pass	Compaction	Pass			

S/U/V: Satisfactory _____ Corrective Date: _____

Comment: _____

CA: _____