

**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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Inspection Date:

05/30/2013

Document Number:

668300272

Overall Inspection:

Unsatisfactory**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	<u>242787</u>	<u>319050</u>	<u>JOHNSON, RANDELL</u>	<input type="checkbox"/>	

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	970-304-5217	lpavelka@nobleenergyinc.com	
Dumas, Ken	720-587-2150/34162	kdumas@nobleenergyinc.com	
Bruner, Ryan	303-228-4158	rbruner@nobleenergyinc.com	

Compliance Summary:QtrQtr: SENE Sec: 28 Twp: 1N Range: 64W

Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Unsatisfactory	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
10/19/2007	200129002	PR	PR	U			Y
02/04/2002	200024167	PR	PR	S		P	N
06/27/1996	500165796	PR	PR				
11/28/1994	500165795		PR			P	

Inspector Comment:**Related Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	
242787	WELL	PR	03/05/1982	OW	123-10578	BLAINE 42-28	<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

Signs/Marker:				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
TANK LABELS/PLACARDS	Unsatisfactory	Buried concrete vessel does not have the required NFPA, contents or capacity signage	Install signs to comply with rule 210.d.	06/30/2013
OTHER	Unsatisfactory	Separator does not have the required NFPA label	Install sign to comply with rule 210.d.	06/30/2013
TANK LABELS/PLACARDS	Unsatisfactory	Steel production tank does not have the required NFPA, contents or capacity signage	Install signs to comply with rule 210.d.	06/30/2013
BATTERY	Satisfactory			
WELLHEAD	Unsatisfactory	Wellhead sign does not have the required operator name or emergency contact number	Install signs to comply with rule 210.d.	06/30/2013

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

Corrective Date: _____

Comment: _____

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
WELLHEAD	Satisfactory	Pipe fencing		

Equipment:					
Type	#	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
Plunger Lift	1	Satisfactory	SE corner of fence around wellhead 40.02400, - 104.54895		
Bird Protectors	1	Satisfactory			
Horizontal Heated Separator	1		SE corner of berm around separator 40.02509, - 104.54662		
Gas Meter Run	1	Satisfactory	SE corner of meter run 40.02520, - 104.54664		

Facilities:		<input type="checkbox"/> New Tank	Tank ID: _____	
Contents	#	Capacity	Type	SE GPS
OTHER	1	OTHER	BV CONCRETE	40.025410,-104.546620
S/U/V:			Comment:	Contents and capacity unknown - no signage/Located inside same berm as steel production tank
Corrective Action:			Corrective Date:	

Paint

Condition	
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				

Facilities: ☐ New Tank Tank ID: _____

Contents	#	Capacity	Type	SE GPS
OTHER	1	OTHER	STEEL AST	40.025410,-104.546620
S/U/V:	Unsatisfactory		Comment:	Tank not painted according to regulations/Contents and capacity unknown - no signage
Corrective Action:			Tanks observable from any public highway shall be painted with uniform, non-contrasting, non-reflective colors matched to, but slightly darker than, the surrounding landscape.	Corrective Date: 06/30/2013

Paint

Condition	Inadequate
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	
NO		

Flaring:				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date

Predrill

Location ID: 319050

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: 242787 Type: WELL API Number: 123-10578 Status: PR Insp. Status: PR

Producing Well

Comment:

Environmental**Spills/Releases:**

Inspector Name: JOHNSON, RANDELL

Type of Spill: _____	Description: _____	Estimated Spill Volume: _____
Comment: <div style="border: 1px solid black; height: 20px; width: 100%;"></div>		
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: _____

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?	Pass	CM	_____	CA	_____	CA Date	_____
	Guy line anchors marked?		CM	_____	CA	_____	CA Date	_____

1003b. Area no longer in use? Pass Production areas stabilized ? Pass

1003c. Compacted areas have been cross ripped? _____

1003d. Drilling pit closed? Pass Subsidence over on drill pit? Pass

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? _____

RESTORATION AND REVEGETATION

Cropland

Inspector Name: JOHNSON, RANDELL

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 _____ 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
Compaction	Pass	Compaction	Pass			
Other	Pass	Other	Pass			
Gravel	Pass	Gravel	Pass			

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

Comment: _____

CA: _____