

**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:

07/12/2013

Document Number:

663801256

Overall Inspection:

Satisfactory**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	334384	334384	LONGWORTH, MIKE	<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
Bruner, Ryan	(303) 228-4158	rbruner@nobleenergyinc.com	Enviromental
Bonkiewicz, Mike	970-625-1494	mbonkiewicz@nobleenergyinc.com	District Manager

Compliance Summary:QtrQtr: SENW Sec: 34 Twp: 7S Range: 95W**Inspector Comment:**

No evidence of AL well on location.

Related Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	
298144	WELL	XX	09/16/2011	LO	045-17081	BATTLEMENT MESA 34-22A (34F)	<input type="checkbox"/>
298352	WELL	XX	09/16/2011	LO	045-17153	BATTLEMENT MESA 34-32A (34Fpad)	<input type="checkbox"/>
298353	WELL	AL	12/04/2012	LO	045-17154	Battlement Mesa 34-32B	<input checked="" type="checkbox"/>
298354	WELL	XX	09/16/2011	LO	045-17155	BATTLEMENT MESA 34-32C (34F)	<input type="checkbox"/>
298355	WELL	PR	04/30/2013	GW	045-17156	BATTLEMENT MESA 34-32D	<input type="checkbox"/>
298356	WELL	PR	04/26/2010	GW	045-17157	BATTLEMENT MESA 34-31A	<input type="checkbox"/>
298357	WELL	PR	07/19/2012	GW	045-17158	BATTLEMENT MESA 34-31B	<input type="checkbox"/>
298358	WELL	PR	11/26/2012	GW	045-17159	BATTLEMENT MESA 34-31C	<input type="checkbox"/>
298359	WELL	XX	10/25/2011	LO	045-17160	BATTLEMENT MESA 34-31D (34F)	<input type="checkbox"/>
298360	WELL	PR	05/01/2012	GW	045-17161	BATTLEMENT MESA 34-23A	<input type="checkbox"/>
298361	WELL	PR	12/29/2009	GW	045-17162	BATTLEMENT MESA 34-22B	<input type="checkbox"/>
298362	WELL	PR	12/15/2009	GW	045-17163	BATTLEMENT MESA 34-22C	<input type="checkbox"/>
298363	WELL	PR	12/29/2009	GW	045-17164	BATTLEMENT MESA 34-22D	<input type="checkbox"/>
298364	WELL	XX	09/16/2011	LO	045-17165	BATTLEMENT MESA 34-21D (34F)	<input type="checkbox"/>
298548	WELL	PR	03/08/2012	GW	045-17152	BATTLEMENT MESA 34-33A	<input type="checkbox"/>

Equipment:Location Inventory

Inspector Name: LONGWORTH, MIKE

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: (S/U/V) _____

Corrective Date: _____

Comment: _____

Corrective Action: _____

Spills:

Type	Area	Volume	Corrective action	CA Date
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☐ Multiple Spills and Releases?

Venting:

Yes/No	Comment
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Flaring:

Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
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Predrill

Location ID: 334384

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: 298353 Type: WELL API Number: 045-17154 Status: AL Insp. Status: AL

Environmental**Spills/Releases:**

Type of Spill: _____ Description: _____ Estimated Spill Volume: _____

Inspector Name: LONGWORTH, MIKE

Comment: <input style="width: 700px;" 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: 300px;" type="text"/>			
Sample Location: <input style="width: 400px;" 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:

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 ? _____

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? _____ Segregated soils have been replaced? _____

RESTORATION AND REVEGETATION

Cropland

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

Inspector Name: LONGWORTH, MIKE

Non-Cropland

Top soil replaced _____

Recontoured _____

80% Revegetation _____

1003 f. Weeds Noxious weeds? _____

Comment: _____

Overall Interim Reclamation

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: _____ Corrective Date: _____

Comment: _____

CA: _____