

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



| | | | |
|----|----|----|----|
| DE | ET | OE | ES |
|----|----|----|----|

Inspection Date:
11/20/2013

Document Number:
673300135

Overall Inspection:
Unsatisfactory

FIELD INSPECTION FORM

| | | | | | |
|---------------------|---------------|---------------|---------------------|--------------------------|-------------|
| Location Identifier | Facility ID | Loc ID | Inspector Name: | On-Site Inspection | 2A Doc Num: |
| | <u>290673</u> | <u>334355</u> | <u>Lamont, Rich</u> | <input type="checkbox"/> | |

Operator Information:

OGCC Operator Number: _____

Name of Operator: NOBLE ENERGY INC

Address: 1625 BROADWAY STE 2200

City: DENVER State: CO Zip: 80202

- THIS IS A FOLLOW UP INSPECTION
- FOLLOW UP INSPECTION REQUIRED
- NO FOLLOW UP INSPECTION REQUIRED
- INSPECTOR REQUESTS FORM 42 WHEN CORRECTIVE ACTIONS ARE COMPLETED

Contact Information:

| Contact Name | Phone | Email | Comment |
|-----------------|----------------|-----------------------------|--------------------|
| KELLERBY, SHAUN | | shaun.kellerby@state.co.us | |
| Pavelka, Linda | (303) 228-4064 | LPavelka@nobleenergyinc.com | Regulatory Analyst |

Compliance Summary:

QtrQtr: SESE Sec: 35 Twp: 7S Range: 96W

| Insp. Date | Doc Num | Insp. Type | Insp Status | Satisfactory /Unsatisfactory | PA P/F/I | Pas/Fail (P/F) | Violation (Y/N) |
|------------|-----------|------------|-------------|------------------------------|----------|----------------|-----------------|
| 07/07/2010 | 200267841 | PR | PR | Satisfactory | | | No |

Inspector Comment:

[Follow up to Inspection #663801051](#)

Related Facilities:

| Facility ID | Type | Status | Status Date | Well Class | API Num | Facility Name | Insp Status | |
|-------------|--------------|--------|-------------|------------|-----------|------------------------|-------------|-------------------------------------|
| 290608 | WELL | PR | 05/08/2008 | GW | 045-14159 | G. JONES 35-44B | PR | <input checked="" type="checkbox"/> |
| 290609 | WELL | PR | 02/01/2013 | GW | 045-14158 | G. JONES 35-44A | PR | <input checked="" type="checkbox"/> |
| 290610 | WELL | PR | 01/29/2013 | GW | 045-14157 | G. JONES 35-34A | PR | <input checked="" type="checkbox"/> |
| 290671 | WELL | PR | 05/16/2008 | GW | 045-14169 | HELEY 35-44C | PR | <input checked="" type="checkbox"/> |
| 290672 | WELL | PR | 01/07/2011 | GW | 045-14168 | HELEY 35-34D | PR | <input checked="" type="checkbox"/> |
| 290673 | WELL | PR | 04/25/2008 | GW | 045-14167 | HELEY 35-34C | PR | <input checked="" type="checkbox"/> |
| 290674 | WELL | PR | 05/12/2008 | GW | 045-14166 | HELEY 35-44D | PR | <input checked="" type="checkbox"/> |
| 291294 | WELL | PR | 01/29/2013 | GW | 045-14324 | G. JONES 35-34B | PR | <input checked="" type="checkbox"/> |
| 427210 | NONFACILIT Y | AC | 01/04/2012 | | - | WATER LINE SGV 350 PAD | AC | <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 |
| BATTERY | Satisfactory | | | |
| TANK LABELS/PLACARDS | Satisfactory | | | |
| WELLHEAD | Satisfactory | | | |

Emergency Contact Number: (S/U/V) Satisfactory Corrective Date: _____

Comment: _____

Corrective Action: _____

| Good Housekeeping: | | | | |
|---------------------------|-----------------------------|--|--------------------------------------|------------|
| Type | Satisfactory/Unsatisfactory | Comment | Corrective Action | CA Date |
| STORAGE OF SUPL | Unsatisfactory | Misc. storage of unused equipment items. see attached pictures A1-A6 | Remove all unused equipment/supplies | 12/23/2013 |

| Spills: | | | | |
|----------------|------|--------|-------------------|---------|
| Type | Area | Volume | Corrective action | CA Date |

Multiple Spills and Releases?

| Fencing/: | | | | |
|------------------|-----------------------------|--|-------------------|---------|
| Type | Satisfactory/Unsatisfactory | Comment | Corrective Action | CA Date |
| WELLHEAD | Satisfactory | metal/wire fencing in place around wellheads. | | |
| SEPARATOR | Satisfactory | Meta/wire fencing in place around separators. | | |
| TANK BATTERY | Satisfactory | Metal/wire fencing in place around separators. | | |

| Equipment: | | | | | |
|---------------------|---|-----------------------------|--|-------------------|---------|
| Type | # | Satisfactory/Unsatisfactory | Comment | Corrective Action | CA Date |
| Bird Protectors | 4 | Satisfactory | | | |
| Ancillary equipment | 1 | Satisfactory | 1 chemical injection unit with containment at wellheads. | | |
| Plunger Lift | 8 | Satisfactory | | | |

Inspector Name: Lamont, Rich

| | | | | |
|-----------------------------|---|--------------|--|--|
| Horizontal Heated Separator | 8 | Satisfactory | | |
| Ancillary equipment | 1 | Satisfactory | Methanol tank with containment on east side of separators. | |

Facilities: New Tank Tank ID: _____

| Contents | # | Capacity | Type | SE GPS |
|--------------------|--------------|----------|-----------------|-----------------------|
| CONDENSATE | 4 | 300 BBLS | STEEL AST | 39.389930,-108.068630 |
| S/U/V: | Satisfactory | Comment: | Sour condensate | |
| 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 |
| NO | |

Flaring:

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

Predrill

Location ID: 290673

Site Preparation:

Lease Road Adeq.: _____ Pads: _____ Soil Stockpile: _____

S/U/V: _____

Corrective Action: _____ Date: _____ CDP Num.: _____

Form 2A COAs:

S/U/V: _____ **Comment:** _____

CA: _____ **Date:** _____

Wildlife BMPs:

S/U/V: _____ **Comment:** _____

CA: _____ **Date:** _____

Stormwater:

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: 290608 Type: WELL API Number: 045-14159 Status: PR Insp. Status: PR

Producing Well

Comment: **PR**

Facility ID: 290609 Type: WELL API Number: 045-14158 Status: PR Insp. Status: PR

Producing Well

Comment: **PR**

Facility ID: 290610 Type: WELL API Number: 045-14157 Status: PR Insp. Status: PR

Producing Well

Comment: **PR**

Facility ID: 290671 Type: WELL API Number: 045-14169 Status: PR Insp. Status: PR

Producing Well

Comment: PR

Facility ID: 290672 Type: WELL API Number: 045-14168 Status: PR Insp. Status: PR

Producing Well

Comment: PR

Facility ID: 290673 Type: WELL API Number: 045-14167 Status: PR Insp. Status: PR

Producing Well

Comment: PR

Facility ID: 290674 Type: WELL API Number: 045-14166 Status: PR Insp. Status: PR

Producing Well

Comment: PR

Facility ID: 291294 Type: WELL API Number: 045-14324 Status: PR Insp. Status: PR

Producing Well

Comment: PR

Facility ID: 427210 Type: NONFACILIT API Number: - Status: AC Insp. Status: AC

Producing Well

Comment: PR

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? _____ 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 _____

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 _____

Inspector Name: Lamont, Rich

Non cropland: Revegetated 80% _____ Cropland: perennial forage _____

Weeds present _____ Subsidence _____

Comment: _____

Corrective Action: _____ Date _____

Overall Final Reclamation _____ Well Release on Active Location 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: _____

Pits: NO SURFACE INDICATION OF PIT

COGCC Comments

| Comment | User | Date |
|--|---------|------------|
| Misc. unused equipment on location. Remove unused equipment. refer to attached pictures A1 - A6. | lamontr | 11/20/2013 |

Attached Documents

You can go to COGCC Images (<https://cogcc.state.co.us/weblink/>) and search by document number:

| Document Num | Description | URL |
|--------------|---------------------|---|
| 673300135 | INSPECTION APPROVED | http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3232994 |
| 673300136 | A1 | http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3232919 |
| 673300137 | A2 | http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3232920 |
| 673300138 | A3 | http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3232921 |
| 673300139 | A4 | http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3232922 |
| 673300140 | A5 | http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3232923 |
| 673300141 | A6 | http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3232924 |