

**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:
01/17/2014

Document Number:
673900145

Overall Inspection:
Satisfactory

FIELD INSPECTION FORM

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	<input type="checkbox"/>
	<u>291659</u>	<u>310237</u>	<u>Rains, Bill</u>	2A Doc Num:	

Operator Information:

OGCC Operator Number:	
Name of Operator:	<u>NOBLE ENERGY INC</u>
Address:	<u>1625 BROADWAY STE 2200</u>
City:	<u>DENVER</u> State: <u>CO</u> Zip: <u>80202</u>

- 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
Pavelka, Linda	303-506-4592	LPavelka@nobleenergyinc.com	
HEATHER, FOGEL		hfogel@nobleenergyinc.com	send all noble inp. to heather

Compliance Summary:

QtrQtr:	<u>SESW</u>	Sec:	<u>16</u>	Twp:	<u>6N</u>	Range:	<u>63W</u>
Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Unsatisfactory	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
07/15/2008	200193972	BH	PR	Satisfactory	I		No

Inspector Comment:

Related Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status	
291656	WELL	PR		OW	123-26126	BASHOR STATE AA 16-11	PR	<input checked="" type="checkbox"/>
291658	WELL	PR		OW	123-26127	BASHOR STATE AA 16-13	PR	<input checked="" type="checkbox"/>
291659	WELL	PR	11/09/2007	OW	123-26115	BASHOR STATE AA 16-14	PR	<input checked="" type="checkbox"/>
291660	WELL	PR		OW	123-26117	BASHOR STATE AA 16-25	PR	<input checked="" type="checkbox"/>
299104	WELL	PR		OW	123-29259	BASHOR STATE AA 16-15	PR	<input checked="" type="checkbox"/>
299105	WELL	PR		OW	123-29260	BASHOR STATE AA 16-23	PR	<input checked="" type="checkbox"/>
299108	WELL	PR		OW	123-29263	BASHOR STATE AA 16-10	PR	<input checked="" type="checkbox"/>
299109	WELL	PR		OW	123-29264	BASHOR STATE AA 16-16	PR	<input checked="" type="checkbox"/>
299129	WELL	PR		GW	123-29271	BASHOR STATE AA 16-24	PR	<input checked="" type="checkbox"/>
299139	WELL	PR		OW	123-29274	BASHOR STATE AA 16-21	PR	<input checked="" type="checkbox"/>

Equipment:	<u>Location Inventory</u>		
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			
WELLHEAD	Satisfactory			
TANK LABELS/PLACARDS	Satisfactory			

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		
TANK BATTERY	Satisfactory	WIRE		

Equipment:					
Type	#	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
Gas Meter Run	4	Satisfactory			
Emission Control Device	2	Satisfactory			
Bird Protectors	6	Satisfactory			
Horizontal Heated Separator	4	Satisfactory			
Plunger Lift	10	Satisfactory			

Facilities:		<input type="checkbox"/> New Tank	Tank ID: _____	
Contents	#	Capacity	Type	SE GPS
PRODUCED WATER	4	<100 BBLS	BV CONCRETE	,
S/U/V:	Satisfactory	Comment:		
Corrective Action:				Corrective Date:
<u>Paint</u>				
Condition	Adequate			
Other (Content)	_____			
Other (Capacity)	_____			
Other (Type)	_____			
<u>Berms</u>				
Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Earth	Adequate	Walls Sufficient	Base Sufficient	Adequate
Corrective Action				Corrective Date
Comment				

Facilities:		<input type="checkbox"/> New Tank	Tank ID: _____	
Contents	#	Capacity	Type	SE GPS
CRUDE OIL	8	300 BBLS	STEEL AST	,
S/U/V:	Satisfactory	Comment:		
Corrective Action:				Corrective Date:
<u>Paint</u>				
Condition	Adequate			
Other (Content)	_____			
Other (Capacity)	_____			
Other (Type)	_____			
<u>Berms</u>				
Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Earth	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
Ignitor/Combustor	Satisfactory			

Predrill

Location ID: 291659

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: 291656 Type: WELL API Number: 123-26126 Status: PR Insp. Status: PR

Producing Well

Comment: **PR**

Facility ID: 291658 Type: WELL API Number: 123-26127 Status: PR Insp. Status: PR

Producing Well

Comment: **PR**

Facility ID: 291659 Type: WELL API Number: 123-26115 Status: PR Insp. Status: PR

Producing Well

Comment: **PR**

Facility ID: <u>291660</u>	Type: <u>WELL</u>	API Number: <u>123-26117</u>	Status: <u>PR</u>	Insp. Status: <u>PR</u>
Producing Well				
Comment: PR				
Facility ID: <u>299104</u>	Type: <u>WELL</u>	API Number: <u>123-29259</u>	Status: <u>PR</u>	Insp. Status: <u>PR</u>
Producing Well				
Comment: PR				
Facility ID: <u>299105</u>	Type: <u>WELL</u>	API Number: <u>123-29260</u>	Status: <u>PR</u>	Insp. Status: <u>PR</u>
Producing Well				
Comment: PR				
Facility ID: <u>299108</u>	Type: <u>WELL</u>	API Number: <u>123-29263</u>	Status: <u>PR</u>	Insp. Status: <u>PR</u>
Producing Well				
Comment: PR				
Facility ID: <u>299109</u>	Type: <u>WELL</u>	API Number: <u>123-29264</u>	Status: <u>PR</u>	Insp. Status: <u>PR</u>
Producing Well				
Comment: PR				
Facility ID: <u>299129</u>	Type: <u>WELL</u>	API Number: <u>123-29271</u>	Status: <u>PR</u>	Insp. Status: <u>PR</u>
Producing Well				
Comment: PR				
Facility ID: <u>299139</u>	Type: <u>WELL</u>	API Number: <u>123-29274</u>	Status: <u>PR</u>	Insp. Status: <u>PR</u>
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 _____ 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 _____

Inspector Name: Rains, Bill

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 In Process 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: _____ Corrective Date: _____

Comment: _____

CA: _____

Pits: NO SURFACE INDICATION OF PIT