

**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:

03/04/2014

Document Number:

600000865

Overall Inspection:

**Unsatisfactory****FIELD INSPECTION FORM**

|                     |             |        |                  |                          |             |
|---------------------|-------------|--------|------------------|--------------------------|-------------|
| Location Identifier | Facility ID | Loc ID | Inspector Name:  | On-Site Inspection       | 2A Doc Num: |
|                     | 247800      | 328138 | JOHNSON, RANDELL | <input type="checkbox"/> |             |

**Operator Information:**

OGCC Operator Number:

Name of Operator: NOBLE ENERGY INCAddress: 1625 BROADWAY STE 2200City: 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                    |
|--------------------|-----------------------------------|--------------------------------|----------------------------|
| Avant, Paul        | O:720-929-6457,<br>C:720-273-2688 | paul.avant@anadarko.com        | Rockies Regulatory Affairs |
| Kilcrease, Keith   | 970-506-5926                      | keith.kilcrease@anadarko.com   | Production Superintendent  |
| Cocciolone, Ashley | 720-929-6625                      | ashley.cocciolone@anadarko.com | Regulatory Supervisor      |

**Compliance Summary:**QtrQtr: SENW Sec: 24 Twp: 2N Range: 68W

| Insp. Date | Doc Num   | Insp. Type | Insp Status | Satisfactory /Unsatisfactory | PA P/F/I | Pas/Fail (P/F) | Violation (Y/N) |
|------------|-----------|------------|-------------|------------------------------|----------|----------------|-----------------|
| 09/28/2006 | 200098852 | PR         | PR          | Satisfactory                 |          | Pass           | No              |
| 05/27/1997 | 500172443 | PR         | PR          |                              |          | Pass           | No              |
| 03/01/1994 | 500172442 |            | PR          |                              |          | Pass           | No              |

**Inspector Comment:****Related Facilities:**

| Facility ID | Type | Status | Status Date | Well Class | API Num   | Facility Name | Insp Status |                                     |
|-------------|------|--------|-------------|------------|-----------|---------------|-------------|-------------------------------------|
| 247800      | WELL | PR     | 07/21/1993  | GW         | 123-15598 | CAVEY U24-2J  | SI          | <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**

| <b>Signs/Marker:</b> |                             |   |                                       |            |
|----------------------|-----------------------------|---|---------------------------------------|------------|
| Type                 | Satisfactory/Unsatisfactory | Comment   | Corrective Action                     | CA Date    |
| WELLHEAD             | Satisfactory                |   |                                       |            |
| TANK LABELS/PLACARDS | Unsatisfactory              | Produced water tank does not have the required capacity or NFPA signage | Install sign to comply with rule 210. | 04/04/2014 |
| BATTERY              | Satisfactory                |   |                                       |            |

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

Corrective Date: \_\_\_\_\_

Comment: \_\_\_\_\_

Corrective Action: \_\_\_\_\_

| <b>Good Housekeeping:</b> |                             |                                 |                   |            |
|---------------------------|-----------------------------|---------------------------------|-------------------|------------|
| Type                      | Satisfactory/Unsatisfactory | Comment                         | Corrective Action | CA Date    |
| WEEDS                     | Unsatisfactory              | Weeds on wellhead location      | Remove weeds      | 04/04/2014 |
| TRASH                     | Unsatisfactory              | Trash around separator location | Remove trash      | 04/04/2014 |
| WEEDS                     | Unsatisfactory              | Weeds on battery location       | Remove weeds      | 04/04/2014 |

| <b>Spills:</b>   |      |        |                   |         |
|--|------|--------|-------------------|---------|
| Type   | Area | Volume | Corrective action | CA Date |
| <input type="checkbox"/> Multiple Spills and Releases? |      |        |                   |         |

| <b>Fencing/:</b> |                             |                    |                   |         |
|------------------|-----------------------------|--------------------|-------------------|---------|
| Type             | Satisfactory/Unsatisfactory | Comment            | Corrective Action | CA Date |
| SEPARATOR        | Satisfactory                | Chain-link fencing |                   |         |
| WELLHEAD         | Satisfactory                | Chain-link fencing |                   |         |
| TANK BATTERY     | Satisfactory                | Chain-link fencing |                   |         |

| <b>Equipment:</b>           |   |                             |         |                   |         |
|-----------------------------|---|-----------------------------|---------|-------------------|---------|
| Type                        | # | Satisfactory/Unsatisfactory | Comment | Corrective Action | CA Date |
| Gas Meter Run               | 1 | Satisfactory                |         |                   |         |
| Horizontal Heated Separator | 1 | Satisfactory                |         |                   |         |
| Plunger Lift                | 1 | Satisfactory                |         |                   |         |

|  |                             |                                   |  |                             |  |
|--|-----------------------------|-----------------------------------|--|-----------------------------|--|
| <b>Facilities:</b>   |                             | <input type="checkbox"/> New Tank |  | Tank ID: _____              |  |
| Contents   | #                           | Capacity                          | Type                                   | SE GPS                      |  |
| CRUDE OIL  | 1                           | 300 BBLS                          | STEEL AST                              | 40.125370,-104.959210       |  |
| S/U/V:   | Satisfactory                |                                   | Comment:                               |                             |  |
| Corrective Action:   |                             |                                   |  | Corrective Date:            |  |
| <b>Paint</b>   |                             |                                   |  |                             |  |
| Condition  | Adequate                    |                                   |  |                             |  |
| Other (Content) _____  |                             |                                   |  |                             |  |
| Other (Capacity) _____   |                             |                                   |  |                             |  |
| Other (Type) _____   |                             |                                   |  |                             |  |
| <b>Berms</b>   |                             |                                   |  |                             |  |
| Type   | Capacity                    | Permeability (Wall)               | Permeability (Base)                    | Maintenance                 |  |
| Earth  | Adequate                    | Walls Sufficient                  | Base Sufficient                        | Adequate                    |  |
| Corrective Action  |                             |                                   |  | Corrective Date             |  |
| Comment  |                             |                                   |  |                             |  |
| <b>Facilities:</b>   |                             | <input type="checkbox"/> New Tank |  | Tank ID: _____              |  |
| Contents   | #                           | Capacity                          | Type                                   | SE GPS                      |  |
| PRODUCED WATER   | 1                           | OTHER                             | BV CONCRETE                            | 40.125370,-104.959150       |  |
| S/U/V:   | Unsatisfactory              |                                   | Comment: Capacity unknown - no signage |                             |  |
| Corrective Action: Produced water tank does not have the required capacity or NFPA signage   |                             |                                   |  | Corrective Date: 04/04/2014 |  |
| <b>Paint</b>   |                             |                                   |  |                             |  |
| Condition  |                             |                                   |  |                             |  |
| Other (Content) _____  |                             |                                   |  |                             |  |
| Other (Capacity) _____   |                             |                                   |  |                             |  |
| Other (Type) _____   |                             |                                   |  |                             |  |
| <b>Berms</b>   |                             |                                   |  |                             |  |
| Type   | Capacity                    | Permeability (Wall)               | Permeability (Base)                    | Maintenance                 |  |
|  | Inadequate                  | Walls Insufficient                | Base Insufficient                      | Inadequate                  |  |
| Corrective Action  |                             |                                   |  | Corrective Date             |  |
| Install a secondary containment of impermeable material around the produced water tank sufficient to contain 150% of any discharged material from the tank |                             |                                   |  | 03/18/2014                  |  |
| Comment: Buried, concrete, produced water tank does not have the required secondary containment  |                             |                                   |  |                             |  |
| <b>Venting:</b>  |                             |                                   |  |                             |  |
| Yes/No   |                             | Comment                           |  |                             |  |
| NO   |                             |                                   |  |                             |  |
| <b>Flaring:</b>  |                             |                                   |  |                             |  |
| Type   | Satisfactory/Unsatisfactory | Comment                           | Corrective Action                      | CA Date                     |  |
|  |                             |                                   |  |                             |  |

**Predrill**

Location ID: 247800

**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: 247800 Type: WELL API Number: 123-15598 Status: PR Insp. Status: SI

**Idle Well**Purpose: ☒ Shut In ☐ Temporarily Abandoned Reminder: \_\_\_\_\_

S/V: \_\_\_\_\_ CA Date: \_\_\_\_\_

CA: \_\_\_\_\_

Comment: Producing intermittently

**Environmental****Spills/Releases:**

Type of Spill: \_\_\_\_\_ Description: \_\_\_\_\_ Estimated Spill Volume: \_\_\_\_\_

Inspector Name: JOHNSON, RANDELL

|   |  |                              |            |
|---|--|------------------------------|------------|
| Comment: <input style="width:700px" type="text"/>         |  |                              |            |
| Corrective Action: _____                                  |  | Date: _____                  |            |
| Reportable: _____   | GPS: Lat _____                                     | Long _____                   |            |
| Proximity to Surface Water: _____                         |  | Depth to Ground Water: _____ |            |
| <b>Water Well:</b>  |  |                              |            |
|   |  | Lat _____                    | Long _____ |
| DWR Receipt Num: _____                                    | Owner Name: _____                                  | GPS : _____                  |            |
| <b>Field Parameters:</b>                                  |  |                              |            |
| <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? 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? \_\_\_\_\_ 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? Pass

Production areas have been stabilized? Pass Segregated soils have been replaced? \_\_\_\_\_

**RESTORATION AND REVEGETATION**

Cropland

Top soil replaced \_\_\_\_\_ Recontoured \_\_\_\_\_ Perennial forage re-established \_\_\_\_\_

Inspector Name: JOHNSON, RANDELL

Non-Cropland

Top soil replaced \_\_\_\_\_

Recontoured \_\_\_\_\_

80% Revegetation \_\_\_\_\_

1003 f. Weeds Noxious weeds? \_\_\_\_\_ F \_\_\_\_\_

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 \_\_\_\_\_

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