

**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
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Inspection Date:

06/02/2014

Document Number:

673703737

Overall Inspection:

SATISFACTORY**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	253869	303980	Sherman, Susan	<input type="checkbox"/>	

Operator Information:OGCC Operator Number: 100322Name 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
Eisterhold, Rachael	(918) 585-1650 X212	regulatory@foundationenergy.com	
KOEHLER, BOB		bob.koehler@state.co.us	

Compliance Summary:QtrQtr: NWNW Sec: 8 Twp: 1N Range: 44W

Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Action Required	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
09/04/2013	664001242	IJ	IJ	SATISFACTORY Y			No
07/23/2012	663300338			SATISFACTORY Y	I		No
06/30/2011	200314657	MI	AC	SATISFACTORY Y			No
06/16/2011	200312786	RT	AC	ACTION REQUIRED			Yes
06/22/2010	200257016	MI	AC	SATISFACTORY Y			No
06/04/2010	200254341	RT	AC	SATISFACTORY Y			No
07/09/2009	200214576	RT	AC	SATISFACTORY Y			No
04/18/2008	200130517	RT	AC	SATISFACTORY Y			No
03/06/2007	200106616	RT	AC	SATISFACTORY Y		Pass	No
07/26/2006	200094480	RT	AC	SATISFACTORY Y		Pass	No
05/02/2005	200070517	MI	SI	SATISFACTORY Y		Pass	No
04/19/2004	200053138	RT	AC	SATISFACTORY Y		Pass	No
08/13/2003	200042526	RT	AC	SATISFACTORY Y		Pass	No

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01/08/2002	200022993	RT	AC	SATISFACTOR Y		Pass	No
05/07/2001	200022818	RT	AC	SATISFACTOR Y		Pass	No
08/10/2000	200008717	MI	AC	SATISFACTOR Y		Pass	No

Inspector Comment:

Related Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status	
150389	UIC DISPOSAL	AC	11/07/1995	DSPW	-	HITT 1 SWD	AC	<input checked="" type="checkbox"/>
253869	WELL	IJ	07/01/1999	IJ	125-07747	HITT SWD 1	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/Action Required	Comment	Corrective Action	CA Date
BATTERY	SATISFACTORY			
CONTAINERS	SATISFACTORY			
TANK LABELS/PLACARDS	SATISFACTORY			
OTHER	SATISFACTORY	lease sign at county road		
WELLHEAD	SATISFACTORY			

Emergency Contact Number (S/A/V): SATISFACTORY

Corrective Date: _____

Comment: **Put on hold for "next available
operator" for <30 seconds.**

Corrective Action: _____

Spills:

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

Equipment:

Type	#	Satisfactory/Action Required	Comment	Corrective Action	CA Date
Deadman # & Marked	4	SATISFACTORY			

Inspector Name: Sherman, Susan

Ancillary equipment	9	SATISFACTORY	propane tank at well, chemical container, solar telemetry, 2 triplex pumps at battery, cathodic protection (Class 1 Div 1), fiberglass well house, storage yard and compressor station next to battery		
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Facilities:

☐ New Tank

Tank ID: _____

Contents	#	Capacity	Type	SE GPS
USED OIL	1	OTHER	PBV CONCRETE	,

S/A/V:		Comment:	see attached photo
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Corrective Action:		Corrective Date:	
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Paint

Condition	
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Other (Content) _____

Other (Capacity) 1500 gals _____

Other (Type) _____

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance

Corrective Action		Corrective Date	
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Comment	
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Facilities:

☐ New Tank

Tank ID: _____

Contents	#	Capacity	Type	SE GPS
PRODUCED WATER	4	400 BBLS	FIBERGLASS AST	40.074020,-102.322100

S/A/V:	SATISFACTORY	Comment:	
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Corrective Action:		Corrective Date:	
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Paint

Condition	Adequate
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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	
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Comment	Concrete berm interspersed in metal berms.
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Venting:

Yes/No	Comment

Inspector Name: Sherman, Susan

Flaring:				
Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date

Predrill

Location ID: 253869

Site Preparation:

Lease Road Adeq.: Pads: Soil Stockpile:

S/A/V:

Corrective Action: Date: CDP Num.:

Form 2A COAs:

S/A/V: **Comment:**

CA: **Date:**

Wildlife BMPs:

S/A/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: 150389 Type: UIC API Number: - Status: AC Insp. Status: AC

Underground Injection Control

UIC Violation: _____

Maximum Injection Pressure: _____

UIC RoutineInj./Tube: Pressure or inches of Hg 170 psi Previous Test Pressure _____ MPP _____
(e.g. 30 psig or -30" Hg) Inj Zone: _____

TC: Pressure or inches of Hg 0 psi Previous Test Pressure _____ Last MIT: _____

Brhd: Pressure or inches of Hg _____ Previous Test Pressure _____ AnnMTReq: _____

Comment: Air from casing died immediately upon opening of valve. Well pumping at time of reading.
UIC permit posted with maximum injection pressure of 728 psi.

Method of Injection: _____

Test Type: _____ Tbg psi: _____ Csg psi: _____ BH psi: _____

Insp. Status: _____

Comment: _____

Facility ID: 253869 Type: WELL API Number: 125-07747 Status: IJ Insp. Status: AC

Underground Injection Control

UIC Violation: _____

Maximum Injection Pressure: _____

UIC RoutineInj./Tube: Pressure or inches of Hg 170 psi Previous Test Pressure _____ MPP _____
(e.g. 30 psig or -30" Hg) Inj Zone: MRSN

TC: Pressure or inches of Hg 0 psi Previous Test Pressure _____ Last MIT: 06/30/2011

Brhd: Pressure or inches of Hg _____ Previous Test Pressure _____ AnnMTReq: _____

Comment: Air from casing died immediately upon opening of valve. Well pumping at time of reading. 1920 BBL/day current injection rate.
Permit posted showing maximum injection pressure of 728 psi and the kill set at 600 psi.

Method of Injection: _____

Test Type: _____ Tbg psi: _____ Csg psi: _____ BH psi: _____

Insp. Status: _____

Comment: _____

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): _____

Inspector Name: Sherman, Susan

Comment: _____

Pilot: _____ Wildlife Protection Devices (fired vessels): _____

Reclamation - Storm Water - Pit

Interim Reclamation:

Date Interim Reclamation Started: _____ Date Interim Reclamation Completed: _____

Land Use: _____

Comment: open rangeland

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 _____

Inspector Name: Sherman, Susan

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
Gravel	Pass	Gravel	Pass	SR	Pass	
Berms	Pass					
Tackifiers	Pass					
Seeding	Pass					
Compaction	Pass	Compaction	Pass	MHSP	Pass	
Waddles	Pass					

S/A/V: SATISFACTOR _____ Corrective Date: _____
Y _____

Comment: **Earth berm on three sides of wellhead, near drainage.**

CA: _____

Pits: ☐ NO SURFACE INDICATION OF PIT

COGCC Comments

Comment	User	Date
MSDS's posted.	ShermaSe	06/04/2014

Attached Documents

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

Document Num	Description	URL
673703752	Foundation Hitt SWD 1 Lease sign	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3356505
673703753	Foundation Hitt SWD 1 Bat sign	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3356506
673703754	Foundation Hitt SWD 1 Well sign	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3356507
673703755	Foundation Hitt SWD 1 Bat SW BMPs	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3356508
673703756	Foundation Hitt SWD 1 well SW BMPs	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3356509
673703757	Foundation Hitt SWD 1 well berms	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3356510

673703758	Foundation Hitt SWD 1 Bat pump controls	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3356511
673703759	Foundation Hitt SWD 1 Bat spill kit	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3356512
673703760	Foundation Hitt SWD 1 Bat Tank labels	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3356513
673703761	Foundation Hitt SWD 1 Bat chemical container	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3356514
673703762	Foundation Hitt SWD 1 Bat vault	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3356515