

**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:
07/14/2014

Document Number:
675100217

Overall Inspection:
SATISFACTORY

FIELD INSPECTION FORM

| | | | | | |
|---------------------|---------------|---------------|-----------------------|--------------------------|-------------|
| Location Identifier | Facility ID | Loc ID | Inspector Name: | On-Site Inspection | 2A Doc Num: |
| | <u>334179</u> | <u>334179</u> | <u>GRANAHAN, KYLE</u> | <input type="checkbox"/> | |

Operator Information:

| | |
|-----------------------|--|
| OGCC Operator Number: | <u>100322</u> |
| 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 |
|------------------|--------------|--------------------------------|------------------|
| Bonkiewicz, Mike | 970-625-1494 | mbonkiewicz@nobleenergyinc.com | District Manager |
| Kellerby, Shaun | | shaun.kellerby@state.co.us | |

Compliance Summary:

| | | | | | | | |
|---------|-------------|------|-----------|------|-----------|--------|------------|
| QtrQtr: | <u>NWNW</u> | Sec: | <u>34</u> | Twp: | <u>7S</u> | Range: | <u>95W</u> |
|---------|-------------|------|-----------|------|-----------|--------|------------|

| Insp. Date | Doc Num | Insp. Type | Insp Status | Satisfactory /Action Required | PA P/F/I | Pas/Fail (P/F) | Violation (Y/N) |
|------------|-----------|------------|-------------|-------------------------------|----------|----------------|-----------------|
| 07/12/2013 | 663801259 | | | ACTION REQUIRED | I | | No |
| 07/12/2013 | 663801258 | | | SATISFACTORY | | | No |

Inspector Comment:

Related Facilities:

| Facility ID | Type | Status | Status Date | Well Class | API Num | Facility Name | Insp Status | |
|-------------|------|--------|-------------|------------|-----------|-------------------------|-------------|-------------------------------------|
| 96 | WELL | PR | 09/09/2008 | GW | 045-15439 | BATTLEMENT MESA 34 -12A | PR | <input checked="" type="checkbox"/> |
| 98 | WELL | PR | 09/06/2008 | GW | 045-15438 | BALTTLEMENT MESA 34-11D | PR | <input checked="" type="checkbox"/> |
| 99 | WELL | PR | 12/20/2008 | GW | 045-15437 | BATTLEMENT MESA 34 -11C | PR | <input checked="" type="checkbox"/> |
| 101 | WELL | PR | 09/27/2008 | GW | 045-15436 | BATTLEMENT MESA 34 -12B | PR | <input checked="" type="checkbox"/> |
| 102 | WELL | AL | 11/13/2008 | LO | 045-15435 | BATTLEMENT MESA 34 -21D | AL | <input type="checkbox"/> |
| 103 | WELL | PR | 05/06/2009 | GW | 045-15434 | BATTLEMENT MESA 34 -11A | PR | <input checked="" type="checkbox"/> |
| 211571 | WELL | AL | 09/25/2001 | LO | 045-07331 | CHEVRON 34-11 | AL | <input type="checkbox"/> |
| 280182 | WELL | AL | 04/03/2009 | LO | 045-11212 | CHEVRON 33-1 (PD34) | AL | <input type="checkbox"/> |
| 280183 | WELL | PR | 10/27/2006 | GW | 045-11213 | CHEVRON 34-4 (PD34) | PR | <input checked="" type="checkbox"/> |

| | | | | | | | | |
|--------|------|----|------------|----|-----------|----------------------------|----|-------------------------------------|
| 294050 | WELL | PR | 12/20/2008 | GW | 045-15225 | BATTLEMENT MESA 34 -21C | PR | <input checked="" type="checkbox"/> |
| 294051 | WELL | PR | 09/27/2008 | GW | 045-15224 | BATTLEMENT MESA 34 -21A | PR | <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

| <u>Signs/Marker:</u> | | | | |
|-----------------------------|------------------------------|---------|-------------------|---------|
| Type | Satisfactory/Action Required | Comment | Corrective Action | CA Date |
| WELLHEAD | SATISFACTORY | | | |
| BATTERY | SATISFACTORY | | | |
| CONTAINERS | SATISFACTORY | | | |
| TANK LABELS/PLACARDS | SATISFACTORY | | | |

Emergency Contact Number (S/A/V): SATISFACTORY Corrective Date: _____

Comment: _____

Corrective Action: _____

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

| <u>Fencing/:</u> | | | | |
|-------------------------|------------------------------|---------|-------------------|---------|
| Type | Satisfactory/Action Required | Comment | Corrective Action | CA Date |
| WELLHEAD | SATISFACTORY | | | |
| TANK BATTERY | SATISFACTORY | | | |
| SEPARATOR | SATISFACTORY | | | |

| <u>Equipment:</u> | | | | | |
|-----------------------------|---|------------------------------|--|-------------------|---------|
| Type | # | Satisfactory/Action Required | Comment | Corrective Action | CA Date |
| Bird Protectors | 4 | SATISFACTORY | | | |
| Plunger Lift | 8 | SATISFACTORY | | | |
| Horizontal Heated Separator | 8 | SATISFACTORY | | | |
| Ancillary equipment | 2 | SATISFACTORY | 2 chemical totes at wellheads with secondary containment | | |

| | | | | | |
|--------------------|------------------------------|-----------------------------------|---------------------|------------------|-----------------|
| Facilities: | | <input type="checkbox"/> New Tank | Tank ID: _____ | | |
| Contents | # | Capacity | Type | SE GPS | |
| CONDENSATE | 3 | 400 BBLS | STEEL AST | , | |
| S/AV: | SATISFACTORY | | Comment: | | |
| Corrective Action: | | | | Corrective Date: | |
| Paint | | | | | |
| Condition | Adequate | | | | |
| Other (Content) | Sour | | | | |
| 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/Action Required | Comment | Corrective Action | CA Date | |
| | | | | | |

Predrill

Location ID: 334179

Site Preparation:

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

S/AV: _____

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

Form 2A COAs:

S/AV: _____ **Comment:** _____

CA: _____ **Date:** _____

Wildlife BMPs:

S/AV: _____ **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: 96 Type: WELL API Number: 045-15439 Status: PR Insp. Status: PR

Producing Well

Comment: PR

Facility ID: 98 Type: WELL API Number: 045-15438 Status: PR Insp. Status: PR

Producing Well

Comment: PR

Facility ID: 99 Type: WELL API Number: 045-15437 Status: PR Insp. Status: PR

Producing Well

Comment: PR

Facility ID: 101 Type: WELL API Number: 045-15436 Status: PR Insp. Status: PR

Producing Well

Comment: **PR**

Facility ID: 103 Type: WELL API Number: 045-15434 Status: PR Insp. Status: PR

Producing Well

Comment: **PR**

Facility ID: 280183 Type: WELL API Number: 045-11213 Status: PR Insp. Status: PR

Producing Well

Comment: **PR**

Facility ID: 294050 Type: WELL API Number: 045-15225 Status: PR Insp. Status: PR

Producing Well

Comment: **PR**

Facility ID: 294051 Type: WELL API Number: 045-15224 Status: PR Insp. Status: PR

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 _____

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

Weeds present _____ Subsidence _____

Comment: _____

| | |
|---------------------------------|--|
| Corrective Action: _____ | Date _____ |
| Overall Final Reclamation _____ | Well Release on Active Location <input type="checkbox"/> |
| | Multi-Well Location <input type="checkbox"/> |

| Storm Water: | | | | | | |
|---------------------|-----------------|-------------------------|-----------------------|---------------|--------------------------|---------|
| Loc Erosion BMPs | BMP Maintenance | Lease Road Erosion BMPs | Lease BMP Maintenance | Chemical BMPs | Chemical BMP Maintenance | Comment |
| | | | | | | |

S/A/V: _____ Corrective Date: _____

Comment: _____

CA: _____

Pits: NO SURFACE INDICATION OF PIT

COGCC Comments

| Comment | User | Date |
|------------------------------|----------|------------|
| Snow plow parked on location | GranahaK | 07/16/2014 |