

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:
11/13/2014

Document Number:
674101719

Overall Inspection:
SATISFACTORY

FIELD INSPECTION FORM

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	<u>437476</u>	<u>437468</u>	<u>Rickard, Jeffrey</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
Fogel, Heather		HFogel@nobleenergyinc.com	
Pavelka, Linda		LPavelka@nobleenergyinc.com	

Compliance Summary:

QtrQtr: SESE Sec: 25 Twp: 4N Range: 65W

Inspector Comment:

Related Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status	
437470	WELL	DG	07/22/2014		123-39549	Heartland State G36-75-1HN	WK	<input checked="" type="checkbox"/>
437471	WELL	DG	08/05/2014		123-39550	Heartland State H01-74-1HN	WK	<input checked="" type="checkbox"/>
437472	WELL	DG	09/13/2014		123-39551	Heartland G25-73-1HN	WK	<input checked="" type="checkbox"/>
437473	WELL	DG	08/13/2014		123-39552	Heartland State H01-73-1HN	WK	<input checked="" type="checkbox"/>
437474	WELL	DG	09/07/2014		123-39553	Heartland State C31-79-1HN	WK	<input checked="" type="checkbox"/>
437475	WELL	DG	09/17/2014		123-39554	Heartland C31-78-1HN	WK	<input checked="" type="checkbox"/>
437476	WELL	DG	08/24/2014		123-39555	Heartland C30-79-1HN	WK	<input checked="" type="checkbox"/>
437477	WELL	DG	08/07/2014		123-39556	Heartland C30-79HN	WK	<input checked="" type="checkbox"/>
437478	WELL	DG	07/23/2014		123-39557	Heartland G25-72-1HN	WK	<input checked="" type="checkbox"/>

Equipment:

Location Inventory

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Inspector Name: Rickard, Jeffrey

Special Purpose Pits: _____	Drilling Pits: _____	Wells: <u>9</u>	Production Pits: _____
Condensate Tanks: <u>1</u>	Water Tanks: <u>6</u>	Separators: <u>18</u>	Electric Motors: _____
Gas or Diesel Mortors: _____	Cavity Pumps: _____	LACT Unit: _____	Pump Jacks: _____
Electric Generators: _____	Gas Pipeline: _____	Oil Pipeline: _____	Water Pipeline: _____
Gas Compressors: <u>3</u>	VOC Combustor: <u>8</u>	Oil Tanks: <u>20</u>	Dehydrator Units: _____
Multi-Well Pits: _____	Pigging Station: _____	Flare: _____	Fuel Tanks: _____

Location

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

Comment: _____

Corrective Action: _____

Spills:

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

Facilities: New Tank Tank ID: _____

Contents	#	Capacity	Type	SE GPS
			CENTRALIZED BATTERY	,

S/A/V: _____ Comment: **Construction being on battery to the north.**

Corrective Action: _____ Corrective Date: _____

Paint

Condition	_____
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Other (Content) _____

Other (Capacity) _____

Other (Type) _____

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance

Corrective Action _____ Corrective Date _____

Comment _____

Venting:

Yes/No	Comment

Flaring:

Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date

Predrill

Location ID: 437476

Site Preparation:

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

S/A/V: _____

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

Form 2A COAs:

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

CA: _____ **Date:** _____

Wildlife BMPs:

BMP Type	Comment
Storm Water/Erosion Control	Stormwater management plans (SWMP) are in place to address construction, drilling and operations associated with Oil & Gas development throughout the state of Colorado in accordance with Colorado Department of Public Health and Environment (CDPHE) General Permit No. COR-038637. BMP's will be constructed around the perimeter of the site prior to, or at the beginning of construction. BMP's used will vary according to the location, and will remain in place until the pad reaches final reclamation.
Material Handling and Spill Prevention	Spill prevention Control and Countermeasures (SPCC) plans are in place to address any possible spill associated with Oil & Gas operations throughout the state of Colorado in accordance with CFR 112.
General Housekeeping	Housekeeping will consist of neat and orderly storage of materials and fluids. Wastes will be temporarily stored in sealed containers and regularly collected and disposed of at offsite, suitable facilities. If spills occur prompt cleanup is required to minimize any commingling of waste materials with stormwater runoff. Routine maintenance will be limited to fueling and lubrication of equipment. Drip pans will be used during routine fueling and maintenance to contain spills or leaks. Any waste product from maintenance will be containerized and transported offsite for disposal or recycling. There will be no major equipment overhauls conducted onsite. Equipment will be transported offsite for major overhauls. Cleanup of trash and discarded materials will be conducted at the end of each work day. Cleanup will consist of patrolling the roadway, access areas, and other work areas to pickup trash, scrap debris, other discarded materials, and any contaminated soil. These materials will be disposed of properly.

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: 437470 Type: WELL API Number: 123-39549 Status: DG Insp. Status: WK

Well Stimulation

Stimulation Company: Schlumberger Stimulation Type: HYDRAULIC FRAC

Observation:

Other: _____

Maximum Casing Recorded: _____ PSI Tubing: _____

Surface: _____ Intermediate: _____

Production: _____ Instantaneous Shut-In Pressure (ISIP) _____

Bradenhead Psi: _____ Frac Flow Back: _____ Fluid: _____ Gas: _____

BradenHead

Comment: Braden head exposed at surface with montotor installed for frac.

CA: _____

CA Date: _____

Facility ID: 437471 Type: WELL API Number: 123-39550 Status: DG Insp. Status: WK

Well Stimulation

Stimulation Company: Schlumberger Stimulation Type: HYDRAULIC FRAC

Observation:

Other: _____

Maximum Casing Recorded: _____ PSI Tubing: _____

Surface: _____ Intermediate: _____

Production: _____ Instantaneous Shut-In Pressure (ISIP) _____

Bradenhead Psi: _____ Frac Flow Back: _____ Fluid: _____ Gas: _____

BradenHead

Comment: Braden head exposed at surface with montotor installed for frac.

CA: _____

CA Date: _____

Facility ID: 437472 Type: WELL API Number: 123-39551 Status: DG Insp. Status: WK

Well Stimulation

Stimulation Company: Schlumberger Stimulation Type: HYDRAULIC FRAC

Observation:

Other: _____

Maximum Casing Recorded: _____ PSI Tubing: _____

Surface: _____ Intermediate: _____

Production: _____ Instantaneous Shut-In Pressure (ISIP) _____

Bradenhead Psi: _____ Frac Flow Back: _____ Fluid: _____ Gas: _____

BradenHead

Comment: Braden head exposed at surface with montotor installed for frac.

CA: _____

CA Date: _____

Facility ID: 437473 Type: WELL API Number: 123-39552 Status: DG Insp. Status: WK

Well Stimulation

Stimulation Company: Schlumberger Stimulation Type: HYDRAULIC FRAC

Observation:

Other: _____

Maximum Casing Recorded: _____ PSI Tubing: _____

Surface: _____ Intermediate: _____

Production: _____ Instantaneous Shut-In Pressure (ISIP) _____

Bradenhead Psi: _____ Frac Flow Back: _____ Fluid: _____ Gas: _____

BradenHead

Comment: Braden head exposed at surface with montotor installed for frac.

CA: _____

CA Date: _____

Facility ID: 437474 Type: WELL API Number: 123-39553 Status: DG Insp. Status: WK

Well Stimulation

Stimulation Company: Halliburton Stimulation Type: HYDRAULIC FRAC

Observation:

Other: _____

Maximum Casing Recorded: _____ PSI Tubing: _____

Surface: _____ Intermediate: _____

Production: _____ Instantaneous Shut-In Pressure (ISIP) _____

Bradenhead Psi: _____ Frac Flow Back: _____ Fluid: _____ Gas: _____

BradenHead

Comment: Braden head exposed at surface with montotor installed for frac.

CA: _____

CA Date: _____

Facility ID: 437475 Type: WELL API Number: 123-39554 Status: DG Insp. Status: WK

Well Stimulation

Stimulation Company: Halliburton Stimulation Type: HYDRAULIC FRAC

Observation:

Other: _____

Maximum Casing Recorded: _____ PSI Tubing: _____

Surface: _____ Intermediate: _____

Production: _____ Instantaneous Shut-In Pressure (ISIP) _____

Bradenhead Psi: _____ Frac Flow Back: _____ Fluid: _____ Gas: _____

BradenHead

Comment: Braden head exposed at surface with montotor installed for frac.

CA: _____

CA Date: _____

Facility ID: 437476 Type: WELL API Number: 123-39555 Status: DG Insp. Status: WK

Well Stimulation

Stimulation Company: Halliburton

Stimulation Type: HYDRAULIC FRAC

Observation:

Other: _____

Maximum Casing Recorded: _____ PSI

Tubing: _____

Surface: _____

Intermediate: _____

Production: _____

Instantaneous Shut-In Pressure (ISIP) _____

Bradenhead Psi: _____

Frac Flow Back: _____

Fluid: _____

Gas: _____

BradenHead

Comment: Braden head exposed at surface with montotor installed for frac.

CA: _____

CA Date: _____

Facility ID: 437477 Type: WELL API Number: 123-39556 Status: DG Insp. Status: WK

Well Stimulation

Stimulation Company: Halliburton

Stimulation Type: HYDRAULIC FRAC

Observation:

Other: _____

Maximum Casing Recorded: _____ PSI

Tubing: _____

Surface: _____

Intermediate: _____

Production: _____

Instantaneous Shut-In Pressure (ISIP) _____

Bradenhead Psi: _____

Frac Flow Back: _____

Fluid: _____

Gas: _____

BradenHead

Comment: Braden head exposed at surface with montotor installed for frac.

CA: _____

CA Date: _____

Facility ID: 437478 Type: WELL API Number: 123-39557 Status: DG Insp. Status: WK

Well Stimulation

Stimulation Company: Halliburton

Stimulation Type: HYDRAULIC FRAC

Observation:

Other: _____

Maximum Casing Recorded: _____ PSI

Tubing: _____

Surface: _____

Intermediate: _____

Production: _____

Instantaneous Shut-In Pressure (ISIP) _____

Bradenhead Psi: _____

Frac Flow Back: _____

Fluid: _____

Gas: _____

BradenHead

Comment: Braden head exposed at surface with montotor installed for frac.

CA: _____

CA Date: _____

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): Y _____

Comment: _____

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

Reclamation - Storm Water - Pit

Interim Reclamation:

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

Land Use: RANGELAND

Comment: _____

1003a. Debris removed? In _____ CM _____

CA _____ CA Date _____

Waste Material Onsite? In _____ CM _____

CA _____ CA Date _____

Unused or unneeded equipment onsite? In _____ CM _____

CA _____ CA Date _____

Pit, cellars, rat holes and other bores closed? In _____ CM _____

CA _____ CA Date _____

Guy line anchors removed? In _____ CM _____

CA _____ CA Date _____

Guy line anchors marked? _____ CM _____

CA _____ CA Date _____

1003b. Area no longer in use? In _____ Production areas stabilized ? In _____

1003c. Compacted areas have been cross ripped? In _____

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? _____

Inspector Name: Rickard, Jeffrey

Comment:

Overall Interim Reclamation

Final Reclamation/ Abandoned Location:

Date Final Reclamation Started: _____ Date Final Reclamation Completed: _____

Final Land Use: RANGELAND

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
Rip Rap	Pass					
Berms	Pass					
Gravel	Pass					

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

Comment:

CA:

Pits: NO SURFACE INDICATION OF PIT