

**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:  
12/17/2015

Document Number:  
673802730

Overall Inspection:  
SATISFACTORY

**FIELD INSPECTION FORM**

|                     |               |               |                     |                          |             |
|---------------------|---------------|---------------|---------------------|--------------------------|-------------|
| Location Identifier | Facility ID   | Loc ID        | Inspector Name:     | On-Site Inspection       | 2A Doc Num: |
|                     | <u>305713</u> | <u>305713</u> | <u>Gomez, Jason</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 |
|--------------|-------|--|---------|
|              |       | <u>NBL_DJBU_Inspections@NB<br/>LENERGY.COM</u> |         |

**Compliance Summary:**

QtrQtr: NWNE Sec: 3 Twp: 6N Range: 65W

**Inspector Comment:**

\_\_\_\_\_

**Related Facilities:**

| Facility ID   | Type        | Status    | Status Date       | Well Class | API Num          | Facility Name       | Insp Status |                                     |
|---------------|-------------|-----------|-------------------|------------|------------------|---------------------|-------------|-------------------------------------|
| <u>281301</u> | <u>WELL</u> | <u>PR</u> | <u>12/21/2005</u> | <u>OW</u>  | <u>123-23385</u> | <u>KASTNER 31-3</u> | <u>PR</u>   | <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:               | Satisfactory/Action Required | Comment | Corrective Action | CA Date |
|-----------------------------|------------------------------|---------|-------------------|---------|
| <u>BATTERY</u>              | <u>SATISFACTORY</u>          |         |                   |         |
| <u>WELLHEAD</u>             | <u>SATISFACTORY</u>          |         |                   |         |
| <u>TANK LABELS/PLACARDS</u> | <u>SATISFACTORY</u>          |         |                   |         |

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

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

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

Corrective Action:

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

| <b>Fencing/:</b> |                              |         |                   |         |
|------------------|------------------------------|---------|-------------------|---------|
| Type             | Satisfactory/Action Required | Comment | Corrective Action | CA Date |
| WELLHEAD         | SATISFACTORY                 | Panel   |                   |         |

| <b>Equipment:</b>           |   |                              |         |                   |         |
|-----------------------------|---|------------------------------|---------|-------------------|---------|
| Type                        | # | Satisfactory/Action Required | Comment | Corrective Action | CA Date |
| Emission Control Device     | 1 | SATISFACTORY                 |         |                   |         |
| Pig Station                 | 1 | SATISFACTORY                 |         |                   |         |
| Gas Meter Run               | 1 | SATISFACTORY                 |         |                   |         |
| Horizontal Heated Separator | 1 | SATISFACTORY                 |         |                   |         |
| Bird Protectors             | 2 | SATISFACTORY                 |         |                   |         |
| Plunger Lift                | 1 | SATISFACTORY                 |         |                   |         |

**Facilities:**  New Tank Tank ID: \_\_\_\_\_

| Contents       | # | Capacity  | Type           | SE GPS                |
|----------------|---|-----------|----------------|-----------------------|
| PRODUCED WATER | 1 | <100 BBLS | PBV FIBERGLASS | 40.521560,-104.649020 |

S/A/V: SATISFACTORY Comment: \_\_\_\_\_

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

**Paint**

|           |          |
|-----------|----------|
| Condition | Adequate |
|-----------|----------|

Other (Content) \_\_\_\_\_

Other (Capacity) \_\_\_\_\_

Other (Type) \_\_\_\_\_

**Berms**

| Type  | Capacity | Permeability (Wall) | Permeability (Base) | Maintenance |
|-------|----------|---------------------|---------------------|-------------|
| Earth | Adequate | Walls Sufficient    | Base Sufficient     | Adequate    |

Corrective Action \_\_\_\_\_ Corrective Date \_\_\_\_\_

Comment \_\_\_\_\_

**Facilities:**  New Tank Tank ID: \_\_\_\_\_

| Contents  | # | Capacity | Type      | SE GPS                |
|-----------|---|----------|-----------|-----------------------|
| CRUDE OIL | 1 | 300 BBLS | STEEL AST | 40.521560,-104.649020 |

S/A/V: SATISFACTORY Comment: \_\_\_\_\_

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

**Paint**

|           |          |
|-----------|----------|
| Condition | Adequate |
|-----------|----------|

Other (Content) \_\_\_\_\_

Inspector Name: Gomez, Jason

Other (Capacity) \_\_\_\_\_

Other (Type) \_\_\_\_\_

**Berms**

| 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/Action Required | Comment | Corrective Action | CA Date |
|------|------------------------------|---------|-------------------|---------|
|      |                              |         |                   |         |

**Predrill**

Location ID: 305713

**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: 281301 Type: WELL API Number: 123-23385 Status: PR Insp. Status: PR

**Idle Well**

Purpose:  Shut In  Temporarily Abandoned Reminder: \_\_\_\_\_

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

CA: SI Tagged out

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

**BradenHead**

Comment: Exposed at surface

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  N

Comment:

Pilot:  OFF  YES Wildlife Protection Devices (fired vessels):  YES  NO

**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?  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  No Production areas stabilized ?  Pass  No

1003c. Compacted areas have been cross ripped?

Inspector Name: Gomez, Jason

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? Pass Segregated soils have been replaced? Pass

RESTORATION AND REVEGETATION

Cropland

Top soil replaced Pass Recontoured Pass 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  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            |                         |                       |               |                          |         |

S/A/V: SATISFACTOR Corrective Date: \_\_\_\_\_  
Y

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

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

**Pits:**  NO SURFACE INDICATION OF PIT