

**FORM
INSP**

Rev
X/15

**State of Colorado
Oil and Gas Conservation Commission**

1120 Lincoln Street, Suite 801, Denver, Colorado 80203
Phone: (303) 894-2100 Fax: (303) 894-2109



Inspection Date:
12/09/2016
Submitted Date:
12/09/2016
Document Number:
685501610

FIELD INSPECTION FORM

Loc ID 423167 Inspector Name: MONTOYA, JOHN On-Site Inspection 2A Doc Num: _____

Status Summary:
 THIS IS A FOLLOW UP INSPECTION
 FOLLOW UP INSPECTION REQUIRED
 NO FOLLOW UP INSPECTION REQUIRED

Findings:
12 Number of Comments
0 Number of Corrective Actions
 Corrective Action Response Requested

Operator Information:
 OGCC Operator Number: 100322
 Name of Operator: NOBLE ENERGY INC
 Address: 1625 BROADWAY STE 2200
 City: DENVER State: CO Zip: 80202

Contact Information:

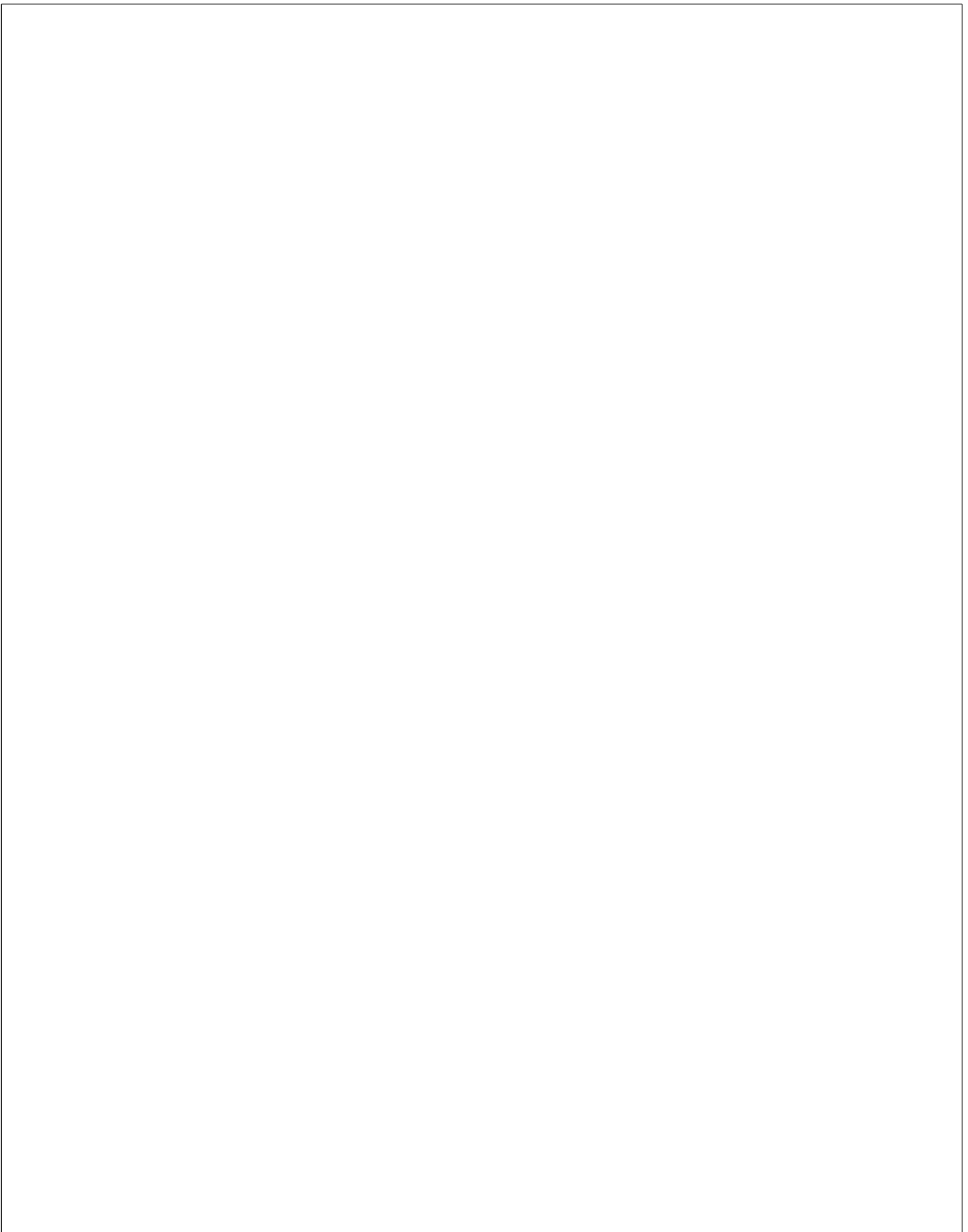
Contact Name	Phone	Email	Comment
		NBL_DJBU_Inspections@NB LENERGY.COM	ALL INSPECTIONS

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
423150	WELL	PR	03/14/2012	OW	123-33513	GUTTERSEN 2N-5HZ	PR
423151	WELL	PR	03/14/2012	OW	123-33514	GUTTERSEN 27N-5HZ	PR
423165	WELL	PR	03/14/2012	OW	123-33518	GUTTERSEN 1N-5HZ	PR

General Comment:

Location			
Lease Road:			
Type	Access		
comment:			
Corrective Action:			Date:
Overall Good: <input checked="" type="checkbox"/>			
Signs/Marker:			
Type	WELLHEAD		
Comment:			
Corrective Action:			Date:
Emergency Contact Number:			
Comment:	OK		
Corrective Action:			Date: _____
Overall Good: <input checked="" type="checkbox"/>			
Spills:			
Type	Area	Volume	
In Containment: No			
Comment:			
<input type="checkbox"/> Multiple Spills and Releases?			
Fencing/:			
Type	WELLHEAD		
Comment:	ROD IRON FENCE SE CORNER N40.14867 W-104.27474		
Corrective Action:			Date:
Equipment:			
Type: Ancillary equipment	#		corrective date
Comment:	2 CHEMICAL PUMPS AND STORAGE CONTAINER		
Corrective Action:			Date:
Type: Plunger Lift	# 3		
Comment:			
Corrective Action:			Date:
Venting:			
Yes/No	NO		
Comment:			
Corrective Action:			Date:
Flaring:			
Type	Ignitor/Combustor		
Comment:			
Corrective Action:			Date:



Inspected Facilities			
Facility ID: <u>423150</u>	Type: <u>WELL</u>	API Number: <u>123-33513</u>	Status: <u>PR</u> Insp. Status: <u>PR</u>
Producing Well			
Comment: <u>PR</u>	Corrective Action: <input style="width: 100%;" type="text"/>		Date: <input style="width: 100%;" type="text"/>
BradenHead			
Comment: <u>BRADENHEAD PLUMBED TO SURFACE</u>	Corrective Action: <input style="width: 100%;" type="text"/>		Date: <input style="width: 100%;" type="text"/>
Facility ID: <u>423151</u>	Type: <u>WELL</u>	API Number: <u>123-33514</u>	Status: <u>PR</u> Insp. Status: <u>PR</u>
Producing Well			
Comment: <u>PR</u>	Corrective Action: <input style="width: 100%;" type="text"/>		Date: <input style="width: 100%;" type="text"/>
BradenHead			
Comment: <u>BRADENHEAD PLUMBED TO SURFACE</u>	Corrective Action: <input style="width: 100%;" type="text"/>		Date: <input style="width: 100%;" type="text"/>
Facility ID: <u>423165</u>	Type: <u>WELL</u>	API Number: <u>123-33518</u>	Status: <u>PR</u> Insp. Status: <u>PR</u>
Producing Well			
Comment: <u>PR</u>	Corrective Action: <input style="width: 100%;" type="text"/>		Date: <input style="width: 100%;" type="text"/>
BradenHead			
Comment: <u>BRADENHEAD PLUMBED TO SURFACE</u>	Corrective Action: <input style="width: 100%;" type="text"/>		Date: <input style="width: 100%;" type="text"/>

Reclamation - Storm Water - Pit

Interim Reclamation:

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

Land Use: RANGELAND

Comment: _____

1002 SITE PREPARATION AND STABILIZATION

1002a. FENCING Pass

Comment _____

Corrective Action _____ Date _____

1002b. SOIL REMOVAL AND SEGREGATION Pass

Comment _____

Corrective Action _____ Date _____

1002c. PROTECTION OF SOILS Pass

Comment _____

Corrective Action _____ Date _____

1002E. SURFACE DISTURBANCE MINIMIZATION Pass

Comment _____

Corrective Action _____ Date _____

1003a. Waste and Debris removed? Pass

Comment _____

Corrective Action _____ Date _____

Unused or unneeded equipment onsite? Pass

Comment _____

Corrective Action _____ Date _____

Pit, cellars, rat holes and other bores closed? Pass

Comment _____

Corrective Action _____ Date _____

Guy line anchors marked? _____

Comment **WELL LOCATION HAS BEEN GREATLY REDUCED**

Corrective Action _____ Date _____

1003b. Area no longer in use? _____ Production areas stabilized ? Pass
1003c. Compacted areas have been cross ripped? _____
1003d. Drilling pit closed? Pass Subsidence over on drill pit? Pass
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 _____

1003e. INTERIM VEGETATION TRANSECT
TRANSECT RESULTS OF DISTURBED AREA% _____
TRANSECT RESULTS OF REFERENCE AREA% _____
TOTAL % OF DESIRABLE VEGETATION COVER _____
VEGETATIVE COVER _____

1003 f. Weeds Noxious weeds? _____

Comment

Corrective Action

Date _____

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 _____

1004.d. FINAL VEGETATION TRANSECT
TRANSECT RESULTS OF DISTURBED AREA% _____
TRANSECT RESULTS OF REFERENCE AREA% _____
TOTAL % OF DESIRABLE VEGETATION COVER _____
VEGETATIVE COVER _____

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			
Comment: <input type="text"/>						
Corrective Action: <input type="text"/>						Date: _____
Pits: <input checked="" type="checkbox"/> NO SURFACE INDICATION OF PIT						

<u>COGCC Comments</u>		
Comment	User	Date
INTER CONTROLLERS ON WELLHEADS	montoyaj	12/09/2016