

FORM
INSPRev
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:

10/29/2018

Submitted Date:

10/29/2018

Document Number:

690002665

FIELD INSPECTION FORM

Loc ID 323703 Inspector Name: Carlile, Craig On-Site Inspection 2A Doc Num: _____

Operator Information:OGCC Operator Number: 100322Name of Operator: NOBLE ENERGY INCAddress: 1001 NOBLE ENERGY WAYCity: HOUSTON State: TX Zip: 77070**Status Summary:**

- THIS IS A FOLLOW UP INSPECTION
 FOLLOW UP INSPECTION REQUIRED
 NO FOLLOW UP INSPECTION REQUIRED

Findings:2 Number of Comments0 Number of Corrective Actions Corrective Action Response Requested

**ANY CORRECTIVE ACTION(S) FROM
PREVIOUS INSPECTIONS THAT HAVE NOT
BEEN ADDRESSED ARE STILL APPLICABLE**

Contact Information:

Contact Name	Phone	Email	Comment
,		NBL_DJBU_Inspections@NB LENERGY.COM	

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
245599	WELL	SI	12/01/2017	OW	123-13394	OCOMA UPRR LEASE B31 -10	SI

General Comment:

Location

Overall Good:

Emergency Contact Number:

Comment:

Corrective Action:

Date: _____

Overall Good:

Spills:

Type	Area	Volume		

In Containment: No

Comment:

Multiple Spills and Releases?

Equipment:

Type				corrective date
Plunger Lift	# 0			
Comment:	<input type="text"/>			
Corrective Action:	<input type="text"/>			Date: <input type="text"/>

Venting:

Yes/No	<input type="text"/>		
Comment:	<input type="text"/>		
Corrective Action:	<input type="text"/>		Date: <input type="text"/>

Flaring:

Type	<input type="text"/>		
Comment:	<input type="text"/>		
Corrective Action:	<input type="text"/>		Date: <input type="text"/>

Inspected Facilities

Facility ID: 245599 Type: WELL API Number: 123-13394 Status: SI Insp. Status: SI

Cement

Cement Contractor

Contractor Name: _____ Contractor Phone: _____

Surface Casing

Cement Volume (sx): _____ Circulate to Surface: _____
 Cement Fall Back: _____ Top Job, 1" Volume: _____

Intermediate Casing

Cement Volume (sxs): _____ Good Return During Job: _____

Production Casing

Cement Volume (sx): _____ Good Return During Job: _____

Plugging Operations

Depth Plugs(feet range): _____ Cement Volume (sx): _____

Good Return During Job: _____ Cement Type: _____

Comment:

Corrective Action: Date: _____

COGCC Comments

Comment	User	Date
Well has form 6(S) in COGCC data base. Former wellhead area is an active construction site. Attached photo was taken from the west edge of construction battiers.	carlilec	10/29/2018

Attached Documents

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

Document Num	Description	URL
690002666	Photo	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4624647