

**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:

01/25/2019

Submitted Date:

01/25/2019

Document Number:

679600256

FIELD INSPECTION FORM

Loc ID 323073 Inspector Name: Santistevan, Brittani On-Site Inspection 2A Doc Num: _____

Operator Information:

OGCC Operator Number: 100322
Name of Operator: NOBLE ENERGY INC
Address: 1001 NOBLE ENERGY WAY
City: HOUSTON State: TX Zip: 77070

Status Summary:

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

Findings:

- 6 Number of Comments
- 1 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 |
|----------------|----------------|--|-----------------|
| Fogel, Heather | (970) 304-5168 | hfogel@nobleenergyinc.com | |
| , | | NBL_DJBU_Inspections@NB LENERGY.COM | ALL INSPECTIONS |
| Pesicka, Conor | | conor.pesicka@state.co.us | |
| Kraich, Adam | | adam.kraich@state.co.us | |

Inspected Facilities:

| Facility ID | Type | Status | Status Date | Well Class | API Num | Facility Name | Insp Status |
|-------------|------|--------|-------------|------------|-----------|---------------|-------------|
| 244723 | WELL | SI | 09/01/2017 | GW | 123-12518 | CARLSON 1 | TA |

General Comment:

Location

Overall Good:

Signs/Marker:

| | | | |
|--------------------|---|-------|------------|
| Type | WELLHEAD | | |
| Comment: | Sign not posted or information inaccurate at well(s) or battery | | |
| Corrective Action: | Install sign to comply with Rule 210.b. | Date: | 02/25/2019 |

Emergency Contact Number:

Comment:

Corrective Action:

Date: _____

Overall Good:

Spills:

| Type | Area | Volume | | |
|------|------|--------|--|--|
| | | | | |

In Containment: No

Comment:

Multiple Spills and Releases?

Fencing/:

| | | | |
|--------------------|----------|-------|--|
| Type | WELLHEAD | | |
| Comment: | Panel | | |
| Corrective Action: | | Date: | |

Equipment:

| Type | # | corrective date |
|-----------------------------|-----|-----------------|
| Horizontal Heated Separator | # 0 | |
| Comment: | | |
| Corrective Action: | | Date: |
| Gas Meter Run | # 0 | |
| Comment: | | |
| Corrective Action: | | Date: |
| Emission Control Device | # 0 | |
| Comment: | | |
| Corrective Action: | | Date: |
| Plunger Lift | # 1 | |
| Comment: | | |
| Corrective Action: | | Date: |
| Pig Station | # 1 | |
| Comment: | | |
| Corrective Action: | | Date: |

Tanks and Berms:

| Contents | # | Capacity | Type | Tank ID | SE GPS |
|-----------|---|----------|------|---------|--------|
| CRUDE OIL | 0 | | | | |

| | | |
|--------------------|--|-------|
| Comment: | | |
| Corrective Action: | | Date: |

Paint

| | | |
|------------------|--|--|
| Condition | | |
| Other (Content) | | |
| Other (Capacity) | | |
| Other (Type) | | |

Berms

| Type | Capacity | Permeability (Wall) | Permeability (Base) | Maintenance |
|--------------------|----------|---------------------|---------------------|-------------|
| | | | | |
| Comment: | | | | |
| Corrective Action: | | | | Date: |

| Contents | # | Capacity | Type | Tank ID | SE GPS |
|--------------------|---|----------|------|---------|--------|
| PRODUCED WATER | 0 | | | | |
| Comment: | | | | | |
| Corrective Action: | | | | | Date: |

Paint

| | | |
|------------------|--|--|
| Condition | | |
| Other (Content) | | |
| Other (Capacity) | | |
| Other (Type) | | |

Berms

| Type | Capacity | Permeability (Wall) | Permeability (Base) | Maintenance |
|--------------------|----------|---------------------|---------------------|-------------|
| | | | | |
| Comment: | | | | |
| Corrective Action: | | | | Date: |

Venting:

| | | | | |
|--------------------|----|--|--|-------|
| Yes/No | NO | | | |
| Comment: | | | | |
| Corrective Action: | | | | Date: |

Flaring:

| | | |
|--------------------|--|--|
| Type | | |
| Comment: | | |
| Corrective Action: | | |

Inspected Facilities

Facility ID: 244723 Type: WELL API Number: 123-12518 Status: SI Insp. Status: TA

Idle Well

Purpose: Shut In Temporarily Abandoned Reminder: _____

Comment:

Corrective Action: Date: _____

BradenHead

Comment:

Corrective Action: Date: _____

COGCC Comments

| Comment | User | Date |
|--|----------|------------|
| At time of inspection all production equipment has been removed from location. Reclamation is in process. Well sign does not reflect correct well. Well is TA. | santistb | 01/25/2019 |

Attached Documents

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

| Document Num | Description | URL |
|--------------|-------------|---|
| 679600257 | Photos | http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4716172 |