

**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:

09/10/2019

Submitted Date:

09/11/2019

Document Number:

696101293

**FIELD INSPECTION FORM**

Loc ID 326943 Inspector Name: Evins, Bret On-Site Inspection  2A Doc Num: \_\_\_\_\_

**Status Summary:**

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

**Operator Information:**

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

**Findings:**

- 9 Number of Comments
- 0 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
Koehler, Bob		bob.koehler@state.co.us	
,		NBL_DJBU_Inspections@nblenergy.com	<a href="#">All Inspections</a>

**Inspected Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
246103	WELL	SI	11/01/2018	ERIW	123-13900	LILLI UNIT 8-6	SI

**General Comment:**

This is a UIC WELL inspection.  
Annual UIC inspection.  
Wells: 1 UIC well: Shut-In | SI.  
UIC Enhanced Recovery Facility: Active Operation. Injecting gas to other Active UIC wells associated with this facility.  
  
Refer to Field Inspection Doc. #696101231 and/or Location ID #327020 for Battery / Facility, Equipment info.  
Refer also to Enhanced Recovery Facility ID #150392.

Location			
<b>Lease Road:</b>			
Type	Access		
comment:	Adequate		
Corrective Action:			Date:
Overall Good: <input type="checkbox"/>			
<b>Signs/Marker:</b>			
Type	WELLHEAD		
Comment:			
Corrective Action:			Date:
<b>Emergency Contact Number:</b>			
Comment:			
Corrective Action:			Date: _____
<b>Good Housekeeping:</b>			
Type			
Comment:			
Corrective Action:			Date:
Overall Good: <input checked="" type="checkbox"/>			
<b>Spills:</b>			
Type	Area	Volume	
In Containment: No			
Comment:			
<input type="checkbox"/> Multiple Spills and Releases?			
<b>Fencing/:</b>			
Type	WELLHEAD		
Comment:	Iron panel		
Corrective Action:			Date:
<b>Equipment:</b>			
Type: Other	# 1		corrective date
Comment:	Wellhead: w/ Master & casing valves.		
Corrective Action:			Date:
Type: Bradenhead	# 1		
Comment:	Appears plumbed to surface.		
Corrective Action:			Date:
<b>Venting:</b>			
Yes/No	NO		
Comment:			
Corrective Action:			Date:
<b>Flaring:</b>			

Type		
Comment:		
Corrective Action:		Date:

**Inspected Facilities**

Facility ID: 246103 Type: WELL API Number: 123-13900 Status: SI Insp. Status: SI

**Underground Injection Control**

UIC Violation: \_\_\_\_\_ Maximum Injection Pressure: 3880

UIC Routine

Inj./Tube: Pressure or inches of Hg 388 Previous Test Pressure \_\_\_\_\_ MPP \_\_\_\_\_  
 (e.g. 30 psig or -30" Hg) Inj Zone: DSND  
 TC: Pressure or inches of Hg 0 Previous Test Pressure \_\_\_\_\_ Last MIT: 10/04/2018  
 Brhd: Pressure or inches of Hg 0 Previous Test Pressure \_\_\_\_\_ AnnMTReq: \_\_\_\_\_

Comment: Annual UIC inspection.  
 Shut-In | SI.  
 Records indicate last injection date: 10/2018.  
 Injection line to well connected at time of inspection.  
 Tbg. Press: 388#  
 Csg. Press: 0#  
 Bradenhead Press: 0#  
 Last MIT: 10/04/2018.  
 MAIP: 3880# Gas injection.  
 Method of Injection: Compressor

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

Method of Injection: PUMP FEED

Test Type: \_\_\_\_\_ Tbg psi: \_\_\_\_\_ Csg psi: \_\_\_\_\_ BH psi: \_\_\_\_\_

Insp. Status: \_\_\_\_\_

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

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

**Idle Well**

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

Comment: Shut-In | SI.  
 Records indicate last injection date: 10/2018.

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

**Reclamation - Storm Water - Pit**

**Storm Water:**

Loc Erosion BMPs	BMP Maintenance	Lease Road Erosion BMPs	Lease BMP Maintenance	Chemical BMPs	Chemical BMP Maintenance	Comment
Gravel						

Comment:

Corrective Action:

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

**Pits:**     NO SURFACE INDICATION OF PIT

**COGCC Comments**

Comment	User	Date
<p><b>COGCC Inspection Report Summary:</b></p> <p>On WED 09/10/2019 at approximately 16:14 hrs. I, Bret Evins, conducted an on-site inspection at:                      Operator Name: NOBLE ENERGY INC                      Location Name: LILLI UNIT-68N58W /6SENE                      Location ID: 326943                      Well Name: Lilli Unit 8-6                      API: 05-123-13900                      Facility Name: LILLI FIELD UNIT /                      Facility ID: 150392                      Facility Type: UIC ENHANCED RECOVERY                      Location / Facility County: Weld County, Colorado                      Weather: Damp w/ wet &amp; muddy areas from prior rain.</p> <p>While there, I observed:                      Well(s): 1 - UIC well: Shut-In   SI.                      UIC Enhanced Recovery Facility: Active Operation. Injecting gas to other Active UIC wells associated with this facility.</p> <p>Refer to Field Inspection Doc. #696101231 and/or Location ID #327020 for Battery / Facility, Equipment info.                      Refer also to Enhanced Recovery Facility ID #150392.</p> <p>NO: Corrective Actions observed on this inspection.</p> <p>This is a summary of the inspection report.</p>	evinsb	09/11/2019

**Attached Documents**

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

Document Num	Description	URL
696101294	Site photos	<a href="http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4935071">http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4935071</a>