

**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:

11/12/2019

Submitted Date:

11/12/2019

Document Number:

696501038**FIELD INSPECTION FORM**Loc ID 302801 Inspector Name: Peterson, Tom 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:**4 Number of Comments1 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
374697	WELL	SI	01/01/2019	GW	123-30261	ZABKA K 20-18	SI

General Comment:

LocationOverall Good: ☒

Signs/Marker:			
Type	WELLHEAD		
Comment:			
Corrective Action:		Date:	

Emergency Contact Number:	
Comment:	
Corrective Action:	Date: _____

Good Housekeeping:		
Type	WEEDS	
Comment:	Weeds have grown around wellhead area. See attached photo.	
Corrective Action:	Comply with Rule 603.f .	Date: 11/22/2019

Overall Good: ☐

Spills:			
Type	Area	Volume	

In Containment: No

Comment: _____

☐ Multiple Spills and Releases?

Fencing/:		
Type	WELLHEAD	
Comment:	Panel	
Corrective Action:		Date:

Equipment:			corrective date
Type: Bradenhead	# 1		
Comment:	Bradenhead valve is exposed at surface.		
Corrective Action:		Date:	
Type: Plunger Lift	# 1		
Comment:			
Corrective Action:		Date:	

Tanks and Berms:

Contents	#	Capacity	Type	Tank ID	SE GPS
			CENTRALIZED BATTERY		
Comment:	Location #302802				
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:		Date:

Inspected Facilities									
Facility ID:	374697	Type:	WELL	API Number:	123-30261	Status:	SI	Insp. Status:	SI
<div>Idle Well</div> <div>Purpose: <input checked="" type="checkbox"/> Shut In <input type="checkbox"/> Temporarily Abandoned Reminder: _____</div> <div>Comment: <input type="text"/></div> <div>Corrective Action: <input type="text"/> Date: _____</div>									

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	Pass			

Comment: Corrective Action: Date: **Pits:** ☐ NO SURFACE INDICATION OF PIT**Attached Documents**You can go to COGCC Images (<https://cogcc.state.co.us/weblink/>) and search by document number:

Document Num	Description	URL
696501039	Photo	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4986609