

**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:

01/08/2021

Submitted Date:

01/08/2021

Document Number:

699303207

FIELD INSPECTION FORM

Loc ID 451500 Inspector Name: Revas, Robbie 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:

15 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
,		NBL_DJBU_Inspections@NB LENERGY.COM	All Inspections

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
451787	WELL	PR	07/01/2018	OW	123-45232	Hullabaloo State Y21-716	PR
451788	WELL	PR	07/19/2018	OW	123-45233	Hullabaloo State Y21-736	PR
451789	WELL	PR	08/10/2018	OW	123-45234	Hullabaloo State Y21-726	PR
451790	WELL	PR	07/26/2018	OW	123-45235	Hullabaloo State Y21-746	PR

General Comment:

Location

Overall Good:

Signs/Marker:

Type	WELLHEAD		
Comment:	adequate		
Corrective Action:		Date:	

Emergency Contact Number:

Comment:		Date:	
Corrective Action:			

Overall Good:

Spills:

Type	Area	Volume		
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In Containment: No

Comment:

Multiple Spills and Releases?

Fencing/:

Type	WELLHEAD		
Comment:	Ag fence		
Corrective Action:		Date:	

Equipment:

Type: Bradenhead	# 4		corrective date
Comment:	appear to be plumbed to surface		
Corrective Action:		Date:	
Type: Ancillary equipment	# 10		
Comment:	automation methanoland corrosion inhibitor		
Corrective Action:		Date:	
Type: Plunger Lift	# 4		
Comment:			
Corrective Action:		Date:	
Type: Gas Meter Run	# 4		
Comment:	cards in meter house indicate current calibration		
Corrective Action:		Date:	

Venting:

Yes/No	NO		
Comment:			
Corrective Action:		Date:	

Flaring:

Type			
Comment:			

Corrective Action:

Date:

Inspected Facilities			
Facility ID: <u>451787</u>	Type: <u>WELL</u>	API Number: <u>123-45232</u>	Status: <u>PR</u> Insp. Status: <u>PR</u>
Producing Well			
Comment: <u>PR</u>	Corrective Action:		Date:
BradenHead			
Date of Last Brhd Test: _____		Annual Brhd Completed? <u>#Error</u>	
Last Brhd Test Results Initial Surf Csg Pressure: _____		Fluid Type: _____	
End Surf Csg Pressure: _____			
Comment: <u>bradenhead test is over 1 yr. and needs to be performed annually, well monitored monthly. Submit bradenhead test information to COGCC engineering.</u>	Corrective Action:		Date:
Facility ID: <u>451788</u>	Type: <u>WELL</u>	API Number: <u>123-45233</u>	Status: <u>PR</u> Insp. Status: <u>PR</u>
Producing Well			
Comment: <u>PR</u>	Corrective Action:		Date:
BradenHead			
Date of Last Brhd Test: _____		Annual Brhd Completed? <u>#Error</u>	
Last Brhd Test Results Initial Surf Csg Pressure: _____		Fluid Type: _____	
End Surf Csg Pressure: _____			
Comment: <u>bradenhead test is over 1 yr. and needs to be performed annually, well monitored monthly. Submit bradenhead test information to COGCC engineering.</u>	Corrective Action:		Date:
Facility ID: <u>451789</u>	Type: <u>WELL</u>	API Number: <u>123-45234</u>	Status: <u>PR</u> Insp. Status: <u>PR</u>
Producing Well			
Comment: <u>PR</u>	Corrective Action:		Date:
BradenHead			
Date of Last Brhd Test: _____		Annual Brhd Completed? <u>#Error</u>	
Last Brhd Test Results Initial Surf Csg Pressure: _____		Fluid Type: _____	
End Surf Csg Pressure: _____			
Comment: <u>bradenhead test is over 1 yr. and needs to be performed annually, well monitored monthly. Submit bradenhead test information to COGCC engineering.</u>	Corrective Action:		Date:
Facility ID: <u>451790</u>	Type: <u>WELL</u>	API Number: <u>123-45235</u>	Status: <u>PR</u> Insp. Status: <u>PR</u>
Producing Well			
Comment: <u>PR</u>	Corrective Action:		Date:

BradenHead

Date of Last Brhd Test: _____ Annual Brhd Completed? #Error

Last Brhd Test Results Initial Surf Csg Pressure: _____ Fluid Type: _____

End Surf Csg Pressure: _____

Comment: bradenhead test is over 1 yr. and needs to be performed annually, well monitored monthly. Submit bradenhead test information to COGCC engineering. _____

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	Pass	Gravel	Pass	Material Handling And Spill Prevention	Pass	

Comment:

Corrective Action:

Date: _____

Pits: NO SURFACE INDICATION OF PIT

COGCC Comments

Comment	User	Date
<p>COGCC Inspection Report Summary On Friday 1/8/2021 at approximately 1220 hrs. I, Inspector Robbie Revas, Conducted an on-site inspection at a Noble Energy Inc. location:</p> <p align="right">Hullabaloo State Y16-27 Pad</p> <p>at Location #451500 in Weld County Colorado. While there, I observed Multi well pad. PR at time of inspection. During this inspection the following possible compliance issues were observed: See attached photos. Location: dry, Weather: clear. No follow up on this site inspection needs to be conducted to ensure the Compliance issues have been corrected to comply with COGCC rules. This is a summary of inspection report.</p>	revasr	01/08/2021

Attached Documents

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

Document Num	Description	URL
699303208	location pics	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=5325939