

**FORM  
INSP**

Rev  
X/20

**State of Colorado  
Energy and Carbon Management Commission**

1120 Lincoln Street, Suite 801, Denver, Colorado 80203  
Phone: (303) 894-2100 Fax: (303) 894-2109



Inspection Date:

09/18/2025

Submitted Date:

09/24/2025

Document Number:

714300274

**FIELD INSPECTION FORM**

Loc ID \_\_\_\_\_ Inspector Name: Brown, Kari 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:**

ECMC Operator Number: 69175  
Name of Operator: PDC ENERGY INC  
Address: 1099 18TH STREET SUITE 1500  
City: DENVER State: CO Zip: 80202

**Findings:**

- 5 Number of Comments
- 2 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                                 |
|---------------|-------|---|---|
| Peterson, Dan |       | danpeterson@chevron.com                           |   |
| Cholas, Nick  |       | nick.cholas@state.co.us                           |   |
| , Inspections |       | rbucogccinspectionreports@chevron.onmicrosoft.com | <a href="#">All Chevron Inspections</a> |

**Inspected Facilities:**

| Facility ID | Type             | Status | Status Date | Well Class | API Num | Facility Name  | Insp Status |
|-------------|------------------|--------|-------------|------------|---------|----------------|-------------|
| 491259      | SPILL OR RELEASE | AC     | 08/29/2025  |            | -       | Noffsinger 2SD | EI          |

**General Comment:**

This is an environmental inspection to determine progress on Spill ID 491259/ Remediation Project No 36664. Any corrective actions from previous inspections, NOAVs, or COAs that have not been addressed are still applicable. There were no operator or contract environmental personnel on location at the time of this field inspection. Photos attached to document site conditions.

**Inspected Facilities**

Facility ID: 491259 Type: SPILL OR API Number: - Status: AC Insp. Status: EI

The subreport 'InspWellFlowline' could not be found at the specified location \\10.14.12

**Environmental**

**Spills/Releases:**

Type of Spill: \_\_\_\_\_ Estimated Spill Volume: \_\_\_\_\_

Comment: Per Form 19 Spill date of discovery is 08/25/2025. Any spill excavation conducted at the Spill location has been backfilled.

Corrective Action: Operator shall provide an updated Form 27 for Remediation #36664 with a workplan and timeline for remediation of Spill ID 491259 Date: \_\_\_\_\_

Reportable: \_\_\_\_\_ GPS: Lat \_\_\_\_\_ Long \_\_\_\_\_

Proximity to Surface Water: \_\_\_\_\_ Depth to Ground Water: \_\_\_\_\_

**Water Well Complaint:**

DWR Receipt Num: \_\_\_\_\_ Owner Name: \_\_\_\_\_ GPS : \_\_\_\_\_ Lat \_\_\_\_\_ Long \_\_\_\_\_

**Field Parameters:**

Sample Location: \_\_\_\_\_ Comment: \_\_\_\_\_

**Waste Management:**

| Type              | Management  | Condition | GPS (Lat) | (Long) |             |
|-------------------|---|-----------|-----------|--------|-------------|
|                   |   |           |           |        |             |
| Comment           | No E&P waste was observed stored on location.   |           |           |        |             |
| Corrective Action | Operator shall provide all waste manifests as required by Rule 905.b.(3) for oily waste hauled off site for disposal. |           |           |        | Date: _____ |

**Spill/Remediation:**

Comment: Spill ID 491259 remains open. Pursuant to Rule 912.b.(6) Operator is required to submit a Form 19 Supplemental Report for the associated spill within 90 days of the spill date requesting closure pursuant to Rule 913.h and supported by adequate documentation to demonstrate that the Spill or Release has been fully cleaned up and complies with Table 915-1; or A Form 27 if any of the criteria listed in Rules 912.b.(6).B.i±iii apply. If Remediation will continue under an approved Form 27, the Operator will also submit a Form 19± Supplemental which requests closure of the Spill or Release and includes the Remediation project number assigned by the Director.

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

Emission Control Burner (ECB): \_\_\_\_\_

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

Pilot: \_\_\_\_\_ Wildlife Protection Devices (fired vessels): \_\_\_\_\_

**Attached Documents**

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

| Document Num | Description          | URL   |
|--------------|----------------------|---|
| 404366782    | INSPECTION SUBMITTED | <a href="http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=7250990">http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=7250990</a> |
| 714300275    | Inspection Photos    | <a href="http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=7250962">http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=7250962</a> |