

**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:

04/27/2020

Submitted Date:

04/27/2020

Document Number:

696301746**FIELD INSPECTION FORM**
 Loc ID 431377 Inspector Name: PETRIE, ERICA 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:**14 Number of Comments3 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
431376	WELL	TA	12/01/2019	OW	123-36580	Bronco State AF10-64-1HN	TA

General Comment:

LocationOverall Good: ☒

Signs/Marker:			
Type	TANK LABELS/PLACARDS		
Comment:	Produced Water Tank is missing NFPA label, see photos		
Corrective Action:	Comply with Rule 210.d.	Date:	06/01/2020
Type	BATTERY		
Comment:	Adequate		
Corrective Action:		Date:	
Type	WELLHEAD		
Comment:	Adequate		
Corrective Action:		Date:	

Emergency Contact Number:

Comment:

Corrective Action:

Date: _____

Good Housekeeping:

Type	UNUSED EQUIPMENT		
Comment:	Unused Wellhead parts at Well site, see photos		
Corrective Action:	Comply with Rule 603.f.	Date:	06/01/2020
Type	UNUSED EQUIPMENT		
Comment:	Unmarked Risers at Wellhead, see photos		
Corrective Action:	Comply with Rule 603.f.	Date:	05/01/2020

Overall Good: ☐

Spills:			
Type	Area	Volume	

In Containment: No

Comment:

☐ Multiple Spills and Releases?

Fencing/:			
Type	LOCATION		
Comment:	Barbed Wire		
Corrective Action:		Date:	
Type	WELLHEAD		
Comment:	Panels		
Corrective Action:		Date:	

Equipment:			corrective date
Type: Emission Control Device	# 2		
Comment:			
Corrective Action:		Date:	

Type: Other	# 1	
Comment:	Sand Trap	
Corrective Action:		Date:
Type: Other	# 1	
Comment:	Wellhead	
Corrective Action:		Date:
Type: Horizontal Heated Separator	# 2	
Comment:		
Corrective Action:		Date:
Type: Bradenhead	# 1	
Comment:	Appears to be plumbed to surface	
Corrective Action:		Date:
Type: Gas Meter Run	# 1	
Comment:		
Corrective Action:		Date:

Tanks and Berms:

Contents	#	Capacity	Type	Tank ID	SE GPS
PRODUCED WATER	1	300 BBLs	FIBERGLASS AST		,
Comment:					
Corrective Action:					Date:

Paint

Condition	Adequate
Other (Content)	
Other (Capacity)	
Other (Type)	

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Comment:	Shares berm with the Crude Oil Tanks			
Corrective Action:				Date:

Contents	#	Capacity	Type	Tank ID	SE GPS
PRODUCED WATER	1	OTHER	BV CONCRETE		,
Comment:					
Corrective Action:					Date:

Paint

Condition	Adequate
Other (Content)	
Other (Capacity)	60 BBLs
Other (Type)	

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance	
Comment:	Shares berm with the Crude Oil Tanks				
Corrective Action:					Date:
Contents	#	Capacity	Type	Tank ID	SE GPS
CRUDE OIL	5	300 BBLs	STEEL AST		40.414700,-104.300700
Comment:					
Corrective Action:					Date:
Paint					
Condition	Adequate				
Other (Content)					
Other (Capacity)					
Other (Type)					
Berms					
Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance	
Metal	Adequate	Walls Sufficient	Base Sufficient	Adequate	
Comment:					
Corrective Action:					Date:
Venting:					
Yes/No					
Comment:					
Corrective Action:					Date:
Flaring:					
Type					
Comment:					
Corrective Action:					Date:

Inspected Facilities									
Facility ID:	431376	Type:	WELL	API Number:	123-36580	Status:	TA	Insp. Status:	TA
Idle Well									
Purpose: <input type="checkbox"/> Shut In <input checked="" type="checkbox"/> Temporarily Abandoned									
Reminder: _____									
Comment: TA									
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			

Comment: Corrective Action: Date: **Pits:** ☒ NO SURFACE INDICATION OF PIT**COGCC Comments**

Comment	User	Date
Routine Field Inspection. Unused Wellhead parts at Well site, Unmarked Risers at Wellhead. Produced Water Tank missing NFPA Label.	petrie	04/27/2020

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

Document Num	Description	URL
402381074	INSPECTION SUBMITTED	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=5132669
696301747	Photos	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=5132668