

**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:

09/20/2017

Submitted Date:

09/20/2017

Document Number:

685503882**FIELD INSPECTION FORM**Loc ID 306221 Inspector Name: MONTOYA, JOHN On-Site Inspection ☐ 2A Doc Num: _____**Operator Information:**OGCC Operator Number: 100322Name of Operator: NOBLE ENERGY INCAddress: 1625 BROADWAY STE 2200City: DENVER State: CO Zip: 80202**Status Summary:**

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

Findings:9 Number of Comments1 Number of Corrective Actions☒ Corrective Action Response Requested**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
286599	WELL	PR	09/11/2012	GW	123-24239	Waste Management D 35-15	SI

General Comment:

LocationOverall Good: ☒

Signs/Marker:			
Type	CONTAINERS		
Comment:			
Corrective Action:		Date:	
Type	BATTERY		
Comment:			
Corrective Action:		Date:	
Type	TANK LABELS/PLACARDS		
Comment:			
Corrective Action:		Date:	
Type	WELLHEAD		
Comment:			
Corrective Action:		Date:	

Emergency Contact Number:

Comment: OK

Corrective Action:

Date: _____

Good Housekeeping:

Type	WEEDS		
Comment:	CONTROL WEEDS		
Corrective Action:	Comply with Rule 603.f .	Date:	09/30/2017

Overall Good: ☐

Spills:			
Type	Area	Volume	

In Containment: No

Comment:

☐ Multiple Spills and Releases?

Fencing/:			
Type	IGNITOR/COMBUSTOR		
Comment:	BARBWIRE FENCE		
Corrective Action:		Date:	
Type	SEPARATOR		
Comment:	BARBWIRE FENCE		
Corrective Action:		Date:	
Type	WELLHEAD		
Comment:			
Corrective Action:		Date:	
Type	TANK BATTERY		

Comment: BARBWIRE WIRE FENCE			
Corrective Action:		Date:	

Equipment:

Type: Bird Protectors	# 1		corrective date
Comment:			
Corrective Action:		Date:	

Type: Plunger Lift	# 1		
Comment: INTERMITTER CONTROLLER ON WELLHEAD			
Corrective Action:		Date:	

Type: Horizontal Heated Separator	# 1		
Comment:			
Corrective Action:		Date:	

Type: Emission Control Device	# 1		
Comment:			
Corrective Action:		Date:	

Type: Gas Meter Run	# 1		
Comment:			
Corrective Action:		Date:	

Tanks and Berms:

Contents	#	Capacity	Type	Tank ID	SE GPS
CRUDE OIL	1	300 BBLS	STEEL AST		40.106020,-104.310050
Comment:					
Corrective Action:		Date:			

Paint

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

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Earth	Adequate	Walls Sufficient	Base Sufficient	Adequate
Comment:				
Corrective Action:		Date:		

Contents	#	Capacity	Type	Tank ID	SE GPS
PRODUCED WATER	1	<50 BBLS	CONCRETE SUMP/VAULT		,
Comment: CONCRETE VAULT 48 BBL CAPACITY					
Corrective Action:		Date:			

Paint

Condition	Adequate
Other (Content)	

Other (Capacity)

Other (Type)

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance	
Earth	Adequate	Walls Sufficient	Base Sufficient	Adequate	
Comment:					
Corrective Action:				Date:	

Venting:

Yes/No	NO		
Comment:			
Corrective Action:			Date:

Flaring:

Type	Ignitor/Combustor	
Comment:		
Corrective Action:		Date:

Inspected Facilities									
Facility ID:	286599	Type:	WELL	API Number:	123-24239	Status:	PR	Insp. Status:	SI
Idle Well									
Purpose: <input checked="" type="checkbox"/> Shut In <input type="checkbox"/> Temporarily Abandoned Reminder: _____									
Comment: _____									
Corrective Action: _____ Date: _____									
BradenHead									
Comment: OK									
Corrective Action: _____ Date: _____									

Reclamation - Storm Water - Pit**Interim Reclamation:**

Date Interim Reclamation Started: _____ Date Interim Reclamation Completed: _____

Land Use: _____

Comment: _____

1002 SITE PREPARATION AND STABILIZATION

1002a. FENCING _____ Pass _____

Comment _____

Corrective Action _____

Date _____

1002b. SOIL REMOVAL AND SEGREGATION _____ Pass _____

Comment _____

Corrective Action _____

Date _____

1002c. PROTECTION OF SOILS _____ Pass _____

Comment _____

Corrective Action _____

Date _____

1002E. SURFACE DISTURBANCE MINIMIZATION _____ Pass _____

Comment _____

Corrective Action _____

Date _____

1003a. Waste and Debris removed? _____ Pass _____

Comment _____

Corrective Action _____

Date _____

Unused or unneeded equipment onsite? _____ Pass _____

Comment _____

Corrective Action _____

Date _____

Pit, cellars, rat holes and other bores closed? _____ Pass _____

Comment _____

Corrective Action _____

Date _____

Guy line anchors marked? _____

Comment _____

Corrective Action _____

Date _____

1003b. Area no longer in use? _____ Production areas stabilized ? Pass

1003c. Compacted areas have been cross ripped? _____

1003d. Drilling pit closed? Pass Subsidence over on drill pit? Pass

Cuttings management: _____

1003e. Areas no longer needed for drilling or subsequent operations for have been re-vegetated to 80% of pre-existing? _____

Production areas have been stabilized? _____ Segregated soils have been replaced? _____

RESTORATION AND REVEGETATIONCropland

Top soil replaced _____ Recontoured _____ Perennial forage re-established _____

Non-Cropland

Top soil replaced _____ Recontoured _____ 80% Revegetation _____

1003e. INTERIM VEGETATION TRANSECT

TRANSECT RESULTS OF DISTURBED AREA% _____

TRANSECT RESULTS OF REFERENCE AREA% _____

TOTAL % OF DESIRABLE VEGETATION COVER _____

VEGETATIVE COVER _____

1003 f. Weeds Noxious weeds? _____

Comment _____

Corrective Action _____ Date _____

Overall Interim Reclamation

Final Reclamation/ Abandoned Location:

Date Final Reclamation Started: _____ Date Final Reclamation Completed: _____

Final Land Use: _____

Reminder: _____

Comment: _____

Well plugged _____ Pit mouse/rat holes, cellars backfilled _____

Debris removed _____ No disturbance /Location never built _____

Access Roads _____ Regraded _____ Contoured _____ Culverts removed _____

Gravel removed _____

Location and associated production facilities reclaimed _____ Locations, facilities, roads, recontoured _____

Compaction alleviation _____ Dust and erosion control _____

Non cropland: Revegetated 80% _____ Cropland: perennial forage _____

Weeds present _____ Subsidence _____

1004.d. FINAL VEGETATION TRANSECT

TRANSECT RESULTS OF DISTURBED AREA% _____

TRANSECT RESULTS OF REFERENCE AREA% _____

TOTAL % OF DESIRABLE VEGETATION COVER _____

VEGETATIVE COVER _____

Comment: _____

Corrective Action: _____ Date _____

Overall Final Reclamation _____ Well Release on Active Location ☐ Multi-Well Location ☐

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

Document Num	Description	URL
685503883	WELLHEAD AND BATTERY AND WEEDS	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4256057
685503884	BATTERY WEEDS AND PROD EQUIPMENT	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4256058