

FORM INSP
Rev 05/11

**State of Colorado
Oil and Gas Conservation Commission**

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



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| DE | ET | OE | ES |
|----|----|----|----|

Inspection Date:
05/14/2013

Document Number:
663801019

Overall Inspection:
Satisfactory

FIELD INSPECTION FORM

| | | | | | |
|---------------------|---------------|---------------|------------------------|--------------------|--------------------------|
| Location Identifier | Facility ID | Loc ID | Inspector Name: | On-Site Inspection | <input type="checkbox"/> |
| | <u>413221</u> | <u>413221</u> | <u>LONGWORTH, MIKE</u> | 2A Doc Num: | |

Operator Information:

OGCC Operator Number: 100322 Name of Operator: NOBLE ENERGY INC
 Address: 1625 BROADWAY STE 2200
 City: DENVER State: CO Zip: 80202

Contact Information:

| Contact Name | Phone | Email | Comment |
|------------------|--------------|--------------------------------|------------------|
| Bonkiewicz, Mike | 970-625-1494 | mbonkiewicz@nobleenergyinc.com | District Manager |

Compliance Summary:

QtrQtr: NWSW Sec: 17 Twp: 7S Range: 94W

Inspector Comment:

Related Facilities:

| Facility ID | Type | Status | Status Date | Well Class | API Num | Facility Name | |
|-------------|------|--------|-------------|------------|-----------|------------------------------|-------------------------------------|
| 413207 | WELL | XX | 09/27/2009 | LO | 045-18739 | JONES 17-23A (17L) | <input checked="" type="checkbox"/> |
| 413208 | WELL | XX | 09/27/2009 | LO | 045-18740 | JONES 17-24B (17L) | <input checked="" type="checkbox"/> |
| 413210 | WELL | XX | 09/27/2009 | LO | 045-18741 | JONES 17-23B (17L) | <input checked="" type="checkbox"/> |
| 413214 | WELL | XX | 09/27/2009 | LO | 045-18743 | DOUBLE B RANCH 18-43C (17L) | <input checked="" type="checkbox"/> |
| 413216 | WELL | XX | 09/27/2009 | LO | 045-18744 | DOUBLE B RANCH 18-43A (17L) | <input checked="" type="checkbox"/> |
| 413218 | WELL | XX | 09/27/2009 | LO | 045-18746 | JONES 17-24A (17L) | <input checked="" type="checkbox"/> |
| 413222 | WELL | XX | 09/27/2009 | LO | 045-18748 | RULISON FEDERAL 17-13B (17L) | <input checked="" type="checkbox"/> |
| 413225 | WELL | XX | 09/27/2009 | LO | 045-18751 | DOUBLE B RANCH 18-43B (17L) | <input checked="" type="checkbox"/> |
| 413233 | WELL | XX | 09/27/2009 | LO | 045-18757 | JONES 17-23D (17L) | <input checked="" type="checkbox"/> |
| 413236 | WELL | XX | 09/27/2009 | LO | 045-18759 | RULISON FEDERAL 17-14B (17L) | <input checked="" type="checkbox"/> |
| 413238 | WELL | XX | 09/27/2009 | LO | 045-18761 | RULISON FEDERAL 17-13A (17L) | <input checked="" type="checkbox"/> |
| 413240 | WELL | XX | 09/27/2009 | LO | 045-18763 | RULISON FEDERAL 17-14A (17L) | <input checked="" type="checkbox"/> |
| 413242 | WELL | XX | 09/27/2009 | LO | 045-18765 | JONES 17-23C (17L) | <input checked="" type="checkbox"/> |
| 413245 | WELL | AL | 06/13/2011 | | 045-18766 | DOUBLE B RANCH 18-43D | <input type="checkbox"/> |
| 413246 | WELL | XX | 09/27/2009 | LO | 045-18767 | RULISON FEDERAL 17-13C (17L) | <input checked="" type="checkbox"/> |
| 413247 | WELL | XX | 09/27/2009 | LO | 045-18768 | RULISON FEDERAL 17-13D (17L) | <input checked="" type="checkbox"/> |

| Equipment: | | Location Inventory | | | |
|------------------------------|-------------------------|----------------------|--------------------------|--|--|
| Special Purpose Pits: _____ | Drilling Pits: <u>1</u> | Wells: <u>16</u> | Production Pits: _____ | | |
| Condensate Tanks: _____ | Water Tanks: _____ | Separators: <u>8</u> | Electric Motors: _____ | | |
| Gas or Diesel Mortors: _____ | Cavity Pumps: _____ | LACT Unit: _____ | Pump Jacks: _____ | | |
| Electric Generators: _____ | Gas Pipeline: <u>1</u> | Oil Pipeline: _____ | Water Pipeline: <u>1</u> | | |
| Gas Compressors: _____ | VOC Combustor: _____ | Oil Tanks: <u>9</u> | Dehydrator Units: _____ | | |
| Multi-Well Pits: _____ | Pigging Station: _____ | Flare: _____ | Fuel Tanks: _____ | | |

Location

| Lease Road: | | | | |
|-------------|-----------------------------|------------------|-------------------|------------|
| Type | Satisfactory/Unsatisfactory | comment | Corrective Action | Date |
| Main | Unsatisfactory | Rough and rutted | Maitain roads | 06/30/2013 |

| Signs/Marker: | | | | |
|---------------|-----------------------------|------------------|-------------------|---------|
| Type | Satisfactory/Unsatisfactory | Comment | Corrective Action | CA Date |
| OTHER | Satisfactory | Sign at entrance | | |

Emergency Contact Number: (S/U/V) Satisfactory Corrective Date: _____
 Comment: _____
 Corrective Action: _____

| Good Housekeeping: | | | | |
|--------------------|-----------------------------|--------------------------------|-------------------|------------|
| Type | Satisfactory/Unsatisfactory | Comment | Corrective Action | CA Date |
| TRASH | Unsatisfactory | pallets, tread protectors, etc | Remove trash | 05/24/2013 |

| Spills: | | | | |
|--|------|--------|-------------------|---------|
| Type | Area | Volume | Corrective action | CA Date |
| <input type="checkbox"/> Multiple Spills and Releases? | | | | |

| Fencing/: | | | | |
|-----------|-----------------------------|---------|-------------------|---------|
| Type | Satisfactory/Unsatisfactory | Comment | Corrective Action | CA Date |
| LOCATION | Satisfactory | | | |

| Equipment: | | | | | |
|-----------------------------|----|-----------------------------|-------------------|-------------------|---------|
| Type | # | Satisfactory/Unsatisfactory | Comment | Corrective Action | CA Date |
| Horizontal Heated Separator | 16 | Satisfactory | 4 Quad separators | | |

| Venting: | |
|----------|---------|
| Yes/No | Comment |
| | |

| Flaring: | | | | |
|----------|-----------------------------|---------|-------------------|---------|
| Type | Satisfactory/Unsatisfactory | Comment | Corrective Action | CA Date |
| | | | | |

Predrill

Location ID: 413221

Site Preparation:

Lease Road Adeq.: _____ Pads: _____ Soil Stockpile: _____
 Corrective Action: _____ Date: _____ CDP Num.: _____

Form 2A COAs:

Comment:

CA: **Date:** _____

Wildlife BMPs:

| BMP Type | Comment |
|---------------|---|
| PROPOSED BMPs | <p>In accordance with applicable Federal, state, and local regulations as well as generally- acceptte 10898</p> <p>industry standards, Noble will implement the following Best Management Practices (BMPs) with regard to its exploration and production activities at the aforementioned location(s)</p> <ul style="list-style-type: none"> • Stormwater management practices dunnng construction and mtenm reclamation phases in accordance with CDPHE regulations • Stormwater management practices in accordance with COGCC rules throughout the operating life of the location • Spill Prevention, Control, and Countermeasure (SPCC) Plans in accordance with 40 CFR Part 112 • Secondary containment for oil and produced water vessels in accordance with COGCC rules • Spill reporting and cleanup per COGCC guidelines, EPA regulations, CDPEH regulations, and Noble policies • Waste minimization practices including re -use and recycling when practicable • Waste management (handling and disposal) practices in accordance with COGCC rules and RCRA guidelines as applicable • Traffic minimization practices whenever possible in order to reduce dust, noise, congestion, road maintenance • Noise minimization • Good housekeeping practices relative to overall site condition • Use of multi -well pad sites for the purpose of minimizing areas of disturbance, traffic, and environmental impact • Proper reclamation and reseeding practices in accordance with COGCC rules, landowner requirements, and BLM stipulations as applicable • Use of portable toilets whenever long -term activities are occurng onsite • Bird protection practices in accordance with the Migratory Bird Act |

Comment:

CA: _____ Date: _____

Stormwater:

| | | | |
|--------------|---------|------------|---------|
| Erosion BMPs | Present | Other BMPs | Present |
| | | | |

Corrective Action: _____ Date: _____

Comments: Erosion BMPs: _____
 Other BMPs: _____

Comment: _____

Staking:

On Site Inspection (305):

Surface Owner Contact Information:

Name: _____ Address: _____
 Phone Number: _____ Cell Phone: _____

Operator Rep. Contact Information:

Landman Name: _____ Phone Number: _____
 Date Onsite Request Received: _____ Date of Rule 306 Consultation: _____

Request LGD Attendance: _____

LGD Contact Information:

Name: _____ Phone Number: _____ Agreed to Attend: _____

Summary of Landowner Issues:

Summary of Operator Response to Landowner Issues:

Onsite Inspection Memorandum Summarizing Discussions at Inspection as Attachment:

| Facility | | | | | | | | | |
|--------------|--------|-------|------|-------------|-----------|---------|----|---------------|----|
| Facility ID: | 413207 | Type: | WELL | API Number: | 045-18739 | Status: | XX | Insp. Status: | ND |
| Facility ID: | 413208 | Type: | WELL | API Number: | 045-18740 | Status: | XX | Insp. Status: | ND |
| Facility ID: | 413210 | Type: | WELL | API Number: | 045-18741 | Status: | XX | Insp. Status: | ND |
| Facility ID: | 413214 | Type: | WELL | API Number: | 045-18743 | Status: | XX | Insp. Status: | ND |
| Facility ID: | 413216 | Type: | WELL | API Number: | 045-18744 | Status: | XX | Insp. Status: | ND |
| Facility ID: | 413218 | Type: | WELL | API Number: | 045-18746 | Status: | XX | Insp. Status: | ND |
| Facility ID: | 413222 | Type: | WELL | API Number: | 045-18748 | Status: | XX | Insp. Status: | ND |
| Facility ID: | 413225 | Type: | WELL | API Number: | 045-18751 | Status: | XX | Insp. Status: | ND |
| Facility ID: | 413233 | Type: | WELL | API Number: | 045-18757 | Status: | XX | Insp. Status: | ND |

| | | | | |
|----------------------------|-------------------|------------------------------|-------------------|-------------------------|
| Facility ID: <u>413236</u> | Type: <u>WELL</u> | API Number: <u>045-18759</u> | Status: <u>XX</u> | Insp. Status: <u>ND</u> |
| Facility ID: <u>413238</u> | Type: <u>WELL</u> | API Number: <u>045-18761</u> | Status: <u>XX</u> | Insp. Status: <u>ND</u> |
| Facility ID: <u>413240</u> | Type: <u>WELL</u> | API Number: <u>045-18763</u> | Status: <u>XX</u> | Insp. Status: <u>ND</u> |
| Facility ID: <u>413242</u> | Type: <u>WELL</u> | API Number: <u>045-18765</u> | Status: <u>XX</u> | Insp. Status: <u>ND</u> |
| Facility ID: <u>413246</u> | Type: <u>WELL</u> | API Number: <u>045-18767</u> | Status: <u>XX</u> | Insp. Status: <u>ND</u> |
| Facility ID: <u>413247</u> | Type: <u>WELL</u> | API Number: <u>045-18768</u> | Status: <u>XX</u> | Insp. Status: <u>ND</u> |

Environmental

Spills/Releases:

Type of Spill: _____ Description: _____ Estimated Spill Volume: _____
 Comment:
 Corrective Action: _____ Date: _____
 Reportable: _____ GPS: Lat _____ Long _____
 Proximity to Surface Water: _____ Depth to Ground Water: _____

Water Well:

DWR Receipt Num: _____ Owner Name: _____ GPS : _____ Lat _____ Long _____

Field Parameters:

Sample Location:

Emission Control Burner (ECB): _____
 Comment: _____
 Pilot: _____ Wildlife Protection Devices (fired vessels): _____

Reclamation - Storm Water - Pit

Interim Reclamation:

Date Interim Reclamation Started: _____ Date Interim Reclamation Completed: _____
 Land Use: RANGELAND
 Comment:
 1003a. Debris removed? Pass CM _____ CA _____ CA Date _____
 Waste Material Onsite? Pass CM _____ CA _____ CA Date _____
 Unused or unneeded equipment onsite? In CM _____ CA _____ CA Date _____
 Pit, cellars, rat holes and other bores closed? _____ CM _____

CA _____ CA Date _____
 Guy line anchors removed? _____ CM _____
 CA _____ CA Date _____
 Guy line anchors marked? _____ CM _____
 CA _____ CA Date _____

1003b. Area no longer in use? _____ Production areas stabilized ? _____
 1003c. Compacted areas have been cross ripped? _____
 1003d. Drilling pit closed? _____ Subsidence over on drill pit? _____
 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 REVEGETATION

Cropland

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

Non-Cropland

Top soil replaced _____ Recontoured _____ 80% Revegetation _____

1003 f. Weeds Noxious weeds? _____

Comment: _____

Overall Interim Reclamation

Final Reclamation/ Abandoned Location:

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

Final Land Use: RANGELAND _____

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 _____

Comment: _____

Corrective Action: _____ Date _____

Overall Final Reclamation

Multi-Well Location

Storm Water:

| Loc Erosion BMPs | BMP Maintenance | Lease Road Erosion BMPs | Lease BMP Maintenance | Chemical BMPs | Chemical BMP Maintenance | Comment |
|------------------|-----------------|-------------------------|-----------------------|---------------|--------------------------|---------|
| Compaction | | | | | | |
| Ditches | | | | | | |

Inspector Name: LONGWORTH, MIKE

| | | | | | | |
|--------|--|--|--|--|--|--|
| Gravel | | | | | | |
| Berms | | | | | | |

S/U/V: Satisfactory Corrective Date: _____

Comment: _____

CA: _____