

**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

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

Inspection Date:
01/27/2015Document Number:
668702266Overall Inspection:
SATISFACTORY**FIELD INSPECTION FORM**

| | | | | | |
|---------------------|-------------|--------|-----------------|--------------------------|-------------|
| Location Identifier | Facility ID | Loc ID | Inspector Name: | On-Site Inspection | 2A Doc Num: |
| | 415811 | 415787 | HELGELAND, GARY | <input type="checkbox"/> | |

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

- ☐ THIS IS A FOLLOW UP INSPECTION
- ☐ FOLLOW UP INSPECTION REQUIRED
- ☒ NO FOLLOW UP INSPECTION REQUIRED
- ☐ INSPECTOR REQUESTS FORM 42 WHEN CORRECTIVE ACTIONS ARE COMPLETED

Contact Information:

| Contact Name | Phone | Email | Comment |
|-----------------|--------------|-----------------------------|--------------------|
| PAVELKA , LINDA | 303-228-4060 | lpavelka@nobleenergyinc.com | REGULATORY ANALYST |

Compliance Summary:QtrQtr: NWNW Sec: 17 Twp: 7N Range: 64W

| Insp. Date | Doc Num | Insp. Type | Insp Status | Satisfactory /Action Required | PA P/F/I | Pas/Fail (P/F) | Violation (Y/N) |
|------------|-----------|------------|-------------|-------------------------------|----------|----------------|-----------------|
| 12/06/2012 | 663300842 | PR | PR | SATISFACTORY | P | | No |
| 12/20/2011 | 661600057 | | | SATISFACTORY | | | No |

Inspector Comment:Interim reclamation inspection only.**Related Facilities:**

| Facility ID | Type | Status | Status Date | Well Class | API Num | Facility Name | Insp Status | |
|-------------|------|--------|-------------|------------|-----------|------------------------|-------------|-------------------------------------|
| 415811 | WELL | PR | 10/17/2010 | OW | 123-31184 | KOHLHOFF USX AB 17-04P | PR | <input checked="" type="checkbox"/> |

Equipment:Location Inventory

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

Location

Emergency Contact Number (S/A/V): _____

Corrective Date: _____

Comment: _____

Corrective Action: _____

Spills:

Inspector Name: HELGELAND, GARY

| Type | Area | Volume | Corrective action | CA Date | | | | | |
|--|------------------------------|--------------------------------|-------------------|-------------|-----------|---------|----|---------------|----|
| <input type="checkbox"/> Multiple Spills and Releases? | | | | | | | | | |
| Venting: | | | | | | | | | |
| Yes/No | | Comment | | | | | | | |
| Flaring: | | | | | | | | | |
| Type | Satisfactory/Action Required | Comment | Corrective Action | CA Date | | | | | |
| Predrill | | | | | | | | | |
| Location ID: 415811 | | | | | | | | | |
| Site Preparation: | | | | | | | | | |
| Lease Road Adeq.: | | Pads: | Soil Stockpile: | | | | | | |
| S/A/V: | | | | | | | | | |
| Corrective Action: | | Date: | CDP Num.: | | | | | | |
| Form 2A COAs: | | | | | | | | | |
| S/A/V: | | Comment: | | | | | | | |
| CA: | | Date: | | | | | | | |
| Wildlife BMPs: | | | | | | | | | |
| S/A/V: | | Comment: | | | | | | | |
| CA: | | Date: | | | | | | | |
| Stormwater: | | | | | | | | | |
| 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: | 415811 | Type: | WELL | API Number: | 123-31184 | Status: | PR | Insp. Status: | PR |

Producing WellComment: **Interim reclamation inspection only.****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: CRP

Comment: _____

1003a. Debris removed? Pass CM _____

CA _____ CA Date _____

Waste Material Onsite? Pass CM _____

CA _____ CA Date _____

Unused or unneeded equipment onsite? Pass CM _____

CA _____ CA Date _____

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

CA _____ CA Date _____

Guy line anchors removed? Pass CM _____

CA _____ CA Date _____

Guy line anchors marked? _____ CM _____

CA _____ CA Date _____

1003b. Area no longer in use? Pass Production areas stabilized ? Pass1003c. Compacted areas have been cross ripped? Pass1003d. Drilling pit closed? Pass Subsidence over on drill pit? Pass

Inspector Name: HELGELAND, GARY

Cuttings management: _____

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

Production areas have been stabilized? Pass

Segregated soils have been replaced? Pass

RESTORATION AND REVEGETATION

Cropland

Top soil replaced Pass

Recontoured Pass

Perennial forage re-established Pass

Non-Cropland

Top soil replaced _____

Recontoured _____

80% Revegetation _____

1003 f. Weeds Noxious weeds? P

Comment: _____

Overall Interim Reclamation Pass

Final Reclamation/ Abandoned Location:

Date Final Reclamation Started: _____

Date Final Reclamation Completed: _____

Final Land Use: CRP

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 _____

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 | | | |

S/A/V: SATISFACTOR
Y

Corrective Date: _____

Comment: _____

CA: _____

Pits: ☐ NO SURFACE INDICATION OF PIT

Attached Documents

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

| Document Num | Description | URL |
|--------------|---------------------|---|
| 668702266 | INSPECTION APPROVED | http://ogccwebblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3539415 |