

**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:

08/16/2018

Submitted Date:

08/16/2018

Document Number:

675000992

FIELD INSPECTION FORM

Loc ID 330906 Inspector Name: Duran, Alicia 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:

OGCC Operator Number: 100322
Name of Operator: NOBLE ENERGY INC
Address: 1001 NOBLE ENERGY WAY
City: HOUSTON State: TX Zip: 77070

Findings:

- 2 Number of Comments
- 0 Number of Corrective Actions
- Corrective Action Response Requested

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
256336	WELL	SI	05/01/2017	OW	123-19851	SCOTTDALE 26-13	PA

General Comment:

Location

Overall Good:

Emergency Contact Number:

Comment:

Corrective Action:

Date: _____

Overall Good:

Spills:

Type	Area	Volume			

In Containment: No

Comment:

Multiple Spills and Releases?

Equipment:

Type: Plunger Lift

0

corrective date

Comment: Wellhead has been removed. Location appears PA'd. See photo.

Corrective Action:

Date: _____

Tanks and Berms:

Contents	#	Capacity	Type	Tank ID	SE GPS
			CENTRALIZED BATTERY		40.288180,-104.855200

Comment:

Corrective Action:

Date: _____

Paint

Condition:

Other (Content):

Other (Capacity):

Other (Type):

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance

Comment:

Corrective Action:

Date: _____

Venting:

Yes/No

Comment:

Corrective Action:

Date: _____

Flaring:

Type	<input type="text"/>
Comment:	<input type="text"/>
Corrective Action:	<input type="text"/>
Date:	_____

Inspected Facilities

Facility ID: 256336 Type: WELL API Number: 123-19851 Status: SI Insp. Status: PA

Cement

Cement Contractor

Contractor Name: _____

Contractor Phone: _____

Surface Casing

Cement Volume (sx): _____

Circulate to Surface: _____

Cement Fall Back: _____

Top Job, 1" Volume: _____

Intermediate Casing

Cement Volume (sxs): _____

Good Return During Job: _____

Production Casing

Cement Volume (sx): _____

Good Return During Job: _____

Plugging Operations

Depth Plugs(feet range): _____

Cement Volume (sx): _____

Good Return During Job: _____

Cement Type: _____

Comment:

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
Seeding	Pass	Seeding	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
675000993	Photo of PA location	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4554610