

**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:

05/08/2020

Submitted Date:

05/08/2020

Document Number:

696301804**FIELD INSPECTION FORM**Loc ID 326919 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:**8 Number of Comments1 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 | |
| Koehler, Bob | | bob.koehler@state.co.us | |

Inspected Facilities:

| Facility ID | Type | Status | Status Date | Well Class | API Num | Facility Name | Insp Status |
|-------------|------|--------|-------------|------------|-----------|----------------|-------------|
| 246065 | WELL | SI | 11/01/2018 | ERIW | 123-13862 | LILLI UNIT 8-8 | SI |

General Comment:

This is a UIC WELL inspection.
Annual UIC inspection.
Wells: 1 UIC well: Shut-In | SI.

LocationOverall Good: ☒

| | | | |
|----------------------|----------|-------|--|
| Signs/Marker: | | | |
| Type | WELLHEAD | | |
| Comment: | Adequate | | |
| Corrective Action: | | Date: | |

| | | | |
|---------------------------|--|--|-------------|
| Emergency Contact Number: | | | |
| Comment: | | | |
| Corrective Action: | | | Date: _____ |

| | | | |
|---------------------------|------------------------------------|-------|------------|
| Good Housekeeping: | | | |
| Type | WEEDS | | |
| Comment: | Weeds actively growing on Wellsite | | |
| Corrective Action: | Comply with Rule 603.f. | Date: | 06/12/2020 |

Overall Good: ☐

| | | | | | |
|----------------|------|--------|--|--|--|
| Spills: | | | | | |
| Type | Area | Volume | | | |

In Containment: No

Comment: _____

☐ Multiple Spills and Releases?

| | | | |
|--------------------|----------|-------|--|
| Fencing/: | | | |
| Type | WELLHEAD | | |
| Comment: | Panels | | |
| Corrective Action: | | Date: | |

| | | | |
|---------------------|---|-------|-----------------|
| Equipment: | | | corrective date |
| Type: Bradenhead | # 1 | | |
| Comment: | Appears to be plumbed to surface | | |
| Corrective Action: | | Date: | |
| Type: Gas Meter Run | # 1 | | |
| Comment: | | | |
| Corrective Action: | | Date: | |
| Type: Other | # 1 | | |
| Comment: | Wellhead, Casing Valves, injection Line | | |
| Corrective Action: | | Date: | |

| | | | |
|--------------------|--|-------|--|
| Venting: | | | |
| Yes/No | | | |
| Comment: | | | |
| Corrective Action: | | Date: | |

| | | |
|-----------------|--|--|
| Flaring: | | |
| Type | | |

| | | | |
|--------------------|--|-------|--|
| Comment: | | | |
| Corrective Action: | | Date: | |

Inspected FacilitiesFacility ID: 246065 Type: WELL API Number: 123-13862 Status: SI Insp. Status: SI**Underground Injection Control**UIC Violation: _____ Maximum Injection Pressure: 908UIC Routine

Inj./Tube: Pressure or inches of Hg 340 Previous Test Pressure _____ MPP _____
(e.g. 30 psig or -30" Hg) Inj Zone: DJSND

TC: Pressure or inches of Hg 8 Previous Test Pressure _____ Last MIT: 12/14/2018

Brhd: Pressure or inches of Hg 0 Previous Test Pressure _____ AnnMTReq: _____

Comment: Annual UIC inspection.
Shut-In | SI.
Records indicate last injection date: 10/2018.
Injection line to well connected at time of inspection.
Tbg. Press: 340#
Csg. Press: 8#
Bradenhead Press: 0#
Last MIT: 12/14/2018.
MAIP: 908#
Method of Injection: Compressor

Corrective Action: _____ Date: _____

Method of Injection: _____

Test Type: _____ Tbg psi: _____ Csg psi: _____ BH psi: _____

Insp. Status: _____

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 |
|------------------|-----------------|-------------------------|-----------------------|---------------|--------------------------|---------|
| Gravel | Pass | Gravel | Pass | | | |

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

| Comment | User | Date |
|---|--------|------------|
| Routine Annual UIC Field Inspection. Weeds actively growing on Wellsite | petrie | 05/08/2020 |

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

| Document Num | Description | URL |
|--------------|----------------------|---|
| 402393919 | INSPECTION SUBMITTED | http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=5145961 |
| 696301805 | Photos | http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=5145957 |