

**FORM
INSP**

Rev
X/20

**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:

07/07/2021

Submitted Date:

07/09/2021

Document Number:

696104678

FIELD INSPECTION FORM

Loc ID 432490 Inspector Name: Evins, Bret 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:

23 Number of Comments
0 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@nblenergy.com	All Inspections

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
432491	WELL	PR	08/01/2020	OW	123-37131	Crow Creek State AC 36-77HN	PR
432492	WELL	PR	08/01/2020	OW	123-37132	Crow Creek State AC 36-76HN	PR
432493	WELL	PR	08/01/2020	OW	123-37133	Crow Creek State AC 36-77-1HN	PR

General Comment:

This is a WELL inspection.
Well(s): 3: Producing | PR.
Battery: Active.

Centralized Battery serves 6 Location IDs
(433025, 432490, 432765, 438842, 438848, 438852).
(Well(s): 26: Producing | PR).

Refer to Field Inspection Report doc. #696104676 and/or Location ID #433025 for Battery / Facility, Equipment info.

Location			
Lease Road:			
Type	Access		
comment:	Adequate		
Corrective Action:		Date:	
Overall Good: <input type="checkbox"/>			
Signs/Marker:			
Type	CONTAINERS		
Comment:	Corrosion Inhibitor, Methanol. Some container labels / placards fading. Consider replacing.		
Corrective Action:		Date:	
Type	WELLHEAD		
Comment:	3: Wellsites.		
Corrective Action:		Date:	
Type			
Comment:	Refer to Field Inspection Report doc. #696104676 and/or Location ID #433025 for Battery / Facility, Equipment info.		
Corrective Action:		Date:	
Emergency Contact Number:			
Comment:			
Corrective Action:			Date: _____
Overall Good: <input type="checkbox"/>			
Spills:			
Type	Area	Volume	
In Containment: No _____			
Comment:			
<input type="checkbox"/> Multiple Spills and Releases?			
Fencing/:			
Type	OTHER		
Comment:	Gas Allocation manifold: Iron pipe.		
Corrective Action:		Date:	
Type	WELLHEAD		
Comment:	3: Wellsites. Iron panel.		
Corrective Action:		Date:	
Type			
Comment:	Refer to Field Inspection Report doc. #696104676 and/or Location ID #433025 for Battery / Facility, Equipment info.		
Corrective Action:		Date:	
Type	LOCATION		
Comment:	Barbed wire.		
Corrective Action:		Date:	

Equipment:			corrective date
Type: Plunger Lift	# 3		
Comment:	3: Wellsites.		
Corrective Action:		Date:	
Type: Gas Meter Run	# 3		
Comment:	At wellsites. 3: Gas Lift Allocation meters. Calibration card indicates calibration within last year. Last calibration: 05/24/2021. Active.		
Corrective Action:		Date:	
Type: Bradenhead	# 3		
Comment:	3: Wellsites. Appears plumbed to surface.		
Corrective Action:		Date:	
Type: Ancillary equipment	# 3		
Comment:	At wellsites: 1: Corrosion Inhibitor pump, tank w/ drip containment. Placarded. 2: Methanol pumps, tanks w/ drip containment. Placarded. For gas lift manifold.		
Corrective Action:		Date:	
Type:	#		
Comment:	Refer to Field Inspection Report doc. #696104676 and/or Location ID #433025 for Battery / Facility, Equipment info.		
Corrective Action:		Date:	

Tanks and Berms:

Contents	#	Capacity	Type	Tank ID	SE GPS
			CENTRALIZED BATTERY		40.524140,-104.383090
Comment:	Centralized Battery serves 6 Location IDs (433025, 432490, 432765, 438842, 438848, 438852). Refer to Field Inspection Report doc. #696104676 and/or Location ID #433025 for Battery / Facility, Equipment info.				
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	NO	
Comment:		

Corrective Action:		Date:	
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Flaring:

Type		
Comment:		
Corrective Action:		Date:

Inspected Facilities

Facility ID: 432491 Type: WELL API Number: 123-37131 Status: PR Insp. Status: PR

Producing Well

Comment: Producing | PR.

Corrective Action:

Date:

BradenHead

Date of Last Brhd Test: 03/22/2020 Annual Brhd Completed? No

Last Brhd Test Results Initial Surf Csg Pressure: 0 Fluid Type: _____

End Surf Csg Pressure: 0

Comment: Required reports not filed. Submit current bradenhead reports per Rule 207.

Corrective Action:

Date:

Facility ID: 432492 Type: WELL API Number: 123-37132 Status: PR Insp. Status: PR

Producing Well

Comment: Producing | PR.

Corrective Action:

Date:

BradenHead

Date of Last Brhd Test: 03/22/2020 Annual Brhd Completed? No

Last Brhd Test Results Initial Surf Csg Pressure: 0 Fluid Type: _____

End Surf Csg Pressure: 0

Comment: Required reports not filed. Submit current bradenhead reports per Rule 207.

Corrective Action:

Date:

Facility ID: 432493 Type: WELL API Number: 123-37133 Status: PR Insp. Status: PR

Producing Well

Comment: Producing | PR.

Corrective Action:

Date:

BradenHead

Date of Last Brhd Test: 03/22/2020 Annual Brhd Completed? No

Last Brhd Test Results Initial Surf Csg Pressure: 0 Fluid Type: _____

End Surf Csg Pressure: 0

Comment: Required reports not filed. Submit current bradenhead reports per Rule 207.

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: <input style="width: 90%;" type="text"/> Corrective Action: <input style="width: 90%;" type="text"/>						Date: _____
Pits: <input type="checkbox"/> NO SURFACE INDICATION OF PIT						

COGCC Comments		
Comment	User	Date
<p>COGCC Inspection Report Summary:</p> <p>On WED 07/07/2021 at approximately 11:46 hrs. I, Bret Evins, conducted an on-site inspection at: Operator Name: NOBLE ENERGY INC Location Name: Crow Creek State AC /36-76HN Pad Location ID: 432490 Well Name(s): Crow Creek State AC 36-77HN, Crow Creek State AC 36-76HN, Crow Creek State AC 36-77-1HN. API: 05-123-37131, 05-123-37132, 05-123-37133. Location County: Weld County, Colorado Weather: Mostly Sunny, dry.</p> <p>While there, I observed: Well(s): 3: Producing PR. Battery: Active.</p> <p>Centralized Battery serves 6 Location IDs (433025, 432490, 432765, 438842, 438848, 438852). (Well(s): 26: Producing PR).</p> <p>Refer to Field Inspection Report doc. #696104676 and/or Location ID #433025 for Battery / Facility, Equipment info.</p> <p>During this inspection, NO possible compliance issues were observed.</p> <p>This is a summary of the inspection report.</p>	evinsb	07/09/2021

Attached Documents

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

Document Num	Description	URL
696104679	Site photos	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=5475878