

**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:

12/07/2021

Submitted Date:

12/15/2021

Document Number:

699602461**FIELD INSPECTION FORM**Loc ID 430079 Inspector Name: Evins, Bret 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:19 Number of Comments0 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 |
|--------------|-------|---|---------------------------------|
| , | | rbucogccinspectionreports@c hevron.onmicrosoft.com | All Inspections |

Inspected Facilities:

| Facility ID | Type | Status | Status Date | Well Class | API Num | Facility Name | Insp Status |
|-------------|------|--------|-------------|------------|-----------|---------------------------------------|-------------|
| 430081 | WELL | PR | 08/01/2020 | OW | 123-36041 | Wells Ranch State USX AA16-66-1HNL | PR |
| 430082 | WELL | PR | 08/01/2020 | OW | 123-36042 | Wells Ranch State USX AA16-67-1HNL | PR |

General Comment:

This is a WELL inspection.
Well(s): 2: Producing | PR.
Battery: Active.

Centralized Battery serves 1 Tank Battery Facility ID
(480961).
Centralized Battery serves 6 Location IDs
(430079, 428799, 428993, 430083, 430389, 430518).
(Well(s): 15: Producing | PR; 1: Temporarily Abandoned | TA).

Refer to Field Inspection Report doc. #699602459 and/or Facility ID #480961
for Battery / Facility, Equipment info.

| Location | | | | |
|--|---|--------|--|-----------------|
| Lease Road: | | | | |
| Type | Access | | | |
| comment: | Adequate | | | |
| Corrective Action | L | | | Date: |
| Overall Good: <input type="checkbox"/> | | | | |
| Signs/Marker: | | | | |
| Type | WELLHEAD | | | |
| Comment: | 2: Wellsites. | | | |
| Corrective Action: | | | | Date: |
| Type | CONTAINERS | | | |
| Comment: | Corrosion Inhibitor, Methanol. | | | |
| Corrective Action: | | | | Date: |
| Type | | | | |
| Comment: | Refer to Field Inspection Report doc. #699602459 and/or Facility ID #480961 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 | | | | |
| Comment: | Refer to Field Inspection Report doc. #699602459 and/or Facility ID #480961 for Battery / Facility, Equipment info. | | | |
| Corrective Action: | | | | Date: |
| Type | WELLHEAD | | | |
| Comment: | 2: Wellsites. Iron panel. | | | |
| Corrective Action: | | | | Date: |
| Type | OTHER | | | |
| Comment: | Gas lift manifold. Iron panel. | | | |
| Corrective Action: | | | | Date: |
| Equipment: | | | | |
| Type: Other | # 2 | | | corrective date |
| Comment: | 2: Wellsites. Gas lift injection lines. | | | |
| Corrective Action: | | | | Date: |

| | | |
|---------------------------|---|-------|
| Type: Gas Meter Run | # 2 | |
| Comment: | 2: Gas lift allocation meters. Calibration cards indicate calibration within last year. Last calibration: 01/21/2021. Active. | |
| Corrective Action: | | Date: |
| Type: Plunger Lift | # 2 | |
| Comment: | 2: Wellsites. | |
| Corrective Action: | | Date: |
| Type: Bradenhead | # 2 | |
| Comment: | 2: Wellsites. Appears plumbed to surface. | |
| Corrective Action: | | Date: |
| Type: | # | |
| Comment: | Refer to Field Inspection Report doc. #699602459 and/or Facility ID #480961 for Battery / Facility, Equipment info. | |
| Corrective Action: | | Date: |
| Type: Ancillary equipment | # 2 | |
| Comment: | 1: Corrosion Inhibitor pump, tank w/ drip containment. Placards. 1: Methanol pump, tank w/ drip containment. Placards. | |
| Corrective Action: | | Date: |

Tanks and Berms:

| Contents | # | Capacity | Type | Tank ID | SE GPS |
|--------------------|---|----------|---------------------|---------|-----------------------|
| | | | CENTRALIZED BATTERY | | 40.487004,-104.411922 |
| Comment: | Centralized Battery serves 1 Tank Battery Facility ID (480961). Centralized Battery serves 6 Location IDs (430079, 428799, 428993, 430083, 430389, 430518). Refer to Field Inspection Report doc. #699602459 and/or Facility ID #480961 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: |

Flaring:

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

Inspected FacilitiesFacility ID: 430081 Type: WELL API Number: 123-36041 Status: PR Insp. Status: PR**Producing Well**Comment: Producing | PR.

Corrective Action:

Date:

BradenHeadDate of Last Brhd Test: 03/29/2021 Annual Brhd Completed? YesLast Brhd Test Results Initial Surf Csg Pressure: 0 Fluid Type: _____End Surf Csg Pressure: 0

Comment:

Corrective Action:

Date:

Facility ID: 430082 Type: WELL API Number: 123-36042 Status: PR Insp. Status: PR**Producing Well**Comment: Producing | PR.

Corrective Action:

Date:

BradenHeadDate of Last Brhd Test: 04/08/2021 Annual Brhd Completed? YesLast Brhd Test Results Initial Surf Csg Pressure: 0 Fluid Type: _____End Surf Csg Pressure: 0

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 | | | | | |

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

| Comment | User | Date |
|--|--------|------------|
| <p>COGCC Inspection Report Summary:</p> <p>On TUE 12/07/2021 at approximately 15:05 hrs. I, Bret Evins, conducted an on-site inspection at: Operator Name: NOBLE ENERGY INC Location Name: Wells Ranch State USX /AA16-66-1HNL Pd Location ID: 430079 Well Name(s): Wells Ranch State USX AA16-66-1HNL, Wells Ranch State USX AA16-67-1HNL. API: 05-123-36041, 05-123-36042. Location County: Weld County, Colorado Weather: Mostly Sunny, dry.</p> <p>While there, I observed: Well(s): 2: Producing PR. Battery: Active.</p> <p>Centralized Battery serves 1 Tank Battery Facility ID (480961). Centralized Battery serves 6 Location IDs (430079, 428799, 428993, 430083, 430389, 430518). (Well(s): 15: Producing PR; 1: Temporarily Abandoned TA).</p> <p>Refer to Field Inspection Report doc. #699602459 and/or Facility ID #480961 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 | 12/15/2021 |

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

| Document Num | Description | URL |
|--------------|-------------|---|
| 699602462 | Site photos | http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=5608656 |