

State of Colorado  
Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203  
Phone: (303) 894-2100 Fax: (303) 894-2109



Document Number:  
401449145

Date Received:  
11/03/2017

**FIR RESOLUTION FORM**

Overall Status: CAC

CA Summary:

2 of 2 CAs from the FIR responded to on this Form

2 CA Completed  
0 Factual Review Request

**OPERATOR INFORMATION**

OGCC Operator Number: 100322

Name of Operator: NOBLE ENERGY INC

Address: 1001 NOBLE ENERGY WAY

City: HOUSTON State: TX Zip: 77070

Contact Name and Telephone:

Name: \_\_\_\_\_

Phone: ( ) \_\_\_\_\_ Fax: ( ) \_\_\_\_\_

Email: \_\_\_\_\_

Additional Operator Contact:

Contact Name

Tesla Dougherty

Phone

970-304-5245

Email

tesla.dougherty@nblenergy.com

COGCC INSPECTION SUMMARY:

FIR Document Number: 684904467

Inspection Date: 09/26/2017

FIR Submit Date: 09/26/2017

FIR Status: \_\_\_\_\_

Inspected Operator Information:

Company Name: NOBLE ENERGY INC

Company Number: 100322

Address: 1625 BROADWAY STE 2200

City: DENVER State: CO Zip: 80202

LOCATION - Location ID: 326772

Location Name: LILLI UNIT-68N58W Number: 8NWNE County: WELD

Qtrqr: NWNE Sec: 8 Twp: 8N Range: 58W Meridian: 6

Latitude: 40.682200 Longitude: -103.884110

FACILITY - API Number: 05-123- -00 Facility ID: 245843

Facility Name: LILLI UNIT Number: 2-8

Qtrqr: NWNE Sec: 8 Twp: 8N Range: 58W Meridian: 6

Latitude: 40.682200 Longitude: -103.884110

CORRECTIVE ACTIONS:

**1** CA# 103016

Corrective Action: Repair or install berms or other secondary containment devices per Rule 605.a.(4).

Date: 12/30/2016

Response: CA COMPLETED

Date of Completion: 10/27/2017

Operator  
Comment:

Noble has cleaned up the berm and stained soil.

COGCC Decision: \_\_\_\_\_

COGCC Representative:			
<b>2</b>	<b>CA# 103017</b>		
Corrective Action:	Install or repair required BMPs per Rule 1002.f.		Date: <u>12/30/2016</u>
Response:	<u>CA COMPLETED</u>		Date of Completion: <u>10/17/2017</u>
Operator Comment:	Noble has repaired the erosion on-site.		
COGCC Decision:			
COGCC Representative:			

<b>OPERATOR COMMENT AND SUBMITTAL</b>	
Comment:	
I hereby certify that the statements made in this form are, to the best of my knowledge, true, correct, and complete.	
Print Name: <u>Tesla Dougherty</u> Title: <u>EHS Specialist</u>	Signed: _____ Date: <u>11/3/2017 8:37:14 AM</u>

### ATTACHMENT LIST

View Attachments in Imaged Documents on COGCC website (<http://ogccweblink.state.co.us/>) - Search by Document Number.

<u>Document Number</u>	<u>Description</u>
401449149	Lilli Unit 2-8 Response

Total Attach: 1 Files