

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:

401759031

Date Received:

09/11/2018

FIR RESOLUTION FORM

Overall Status: FRQ

CA Summary:

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

0 CA Completed

1 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	Phone	Email
<u>Tesla Dougherty</u>	<u>970-304-5245</u>	<u>tesla.dougherty@nblenergy.com</u>
<u>Abby Bazin</u>	<u>720-587-2356</u>	<u>Abby.Bazin@nblenergy.com</u>

COGCC INSPECTION SUMMARY:

FIR Document Number: 682503854

Inspection Date: 09/07/2018

FIR Submit Date: 09/10/2018

FIR Status: _____

Inspected Operator Information:

Company Name: NOBLE ENERGY INC

Company Number: 100322

Address: 1001 NOBLE ENERGY WAY

City: HOUSTON State: TX Zip: 77070

LOCATION - Location ID: 456690

Location Name: LG Number: 09-03 PAD County: _____

Qtrqtr: NENW Sec: 9 Twp: 8N Range: 59W Meridian: 6

Latitude: 40.683200 Longitude: -103.986060

FACILITY - API Number: 05-123-00 Facility ID: 456690

Facility Name: LG Number: 09-03 PAD

Qtrqtr: NENW Sec: 9 Twp: 8N Range: 59W Meridian: 6

Latitude: 40.683200 Longitude: -103.986060

CORRECTIVE ACTIONS:

2 CA# 118556

Corrective Action: Provide detailed calculations with documentation showing the amount of topsoil horizon that the operator salvaged, separated and stored for the location in accordance with 1002.b.(2).

Date: 09/14/2018

Response: FACTUAL REVIEW REQUEST

Basis for Review: Corrective action dates are not attainable

Noble is preparing the information requested; however, we respectfully request additional time to submit a response. The inspection was received 9/11/2018 and we believe three days is not enough time to address this

Operator Comment: corrective action. Additionally, we believe that allowing more time will not negatively impact the outcome.

COGCC Decision: _____

COGCC Representative: _____

OPERATOR COMMENT AND SUBMITTAL

Comment: _____

I hereby certify that the statements made in this form are, to the best of my knowledge, true, correct, and complete.

Print Name: Tesla Doughetry Signed: _____

Title: EHS Specialist Date: 9/11/2018 10:53:59 AM

ATTACHMENT LIST

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

Document Number **Description**

<u>Document Number</u>	<u>Description</u>

Total Attach: 0 Files