

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:

401932277

Date Received:

02/07/2019

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: 10311

Name of Operator: SRC ENERGY INC

Address: 1675 BROADWAY SUITE 2600

City: DENVER State: CO Zip: 80202

Contact Name and Telephone:

Name: _____

Phone: () _____ Fax: () _____

Email: _____

Additional Operator Contact:

Contact Name

Phone

Email

Kraich, Adam

cogccinspections@srcenergy.com

adam.kraich@state.co.us

COGCC INSPECTION SUMMARY:

FIR Document Number: 679600290

Inspection Date: 01/31/2019

FIR Submit Date: 01/31/2019

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: 330452

Location Name: HSR-WIEDEMAN-65N66W Number: 20SESW County: WELD

Qtrqtr: SESW Sec: 20 Twp: 5N Range: 66W Meridian: 6

Latitude: 40.379270 Longitude: -104.805370

FACILITY - API Number: 05-123- -00 Facility ID: 251336

Facility Name: HSR-WIEDEMAN Number: 14-20

Qtrqtr: SESW Sec: 20 Twp: 5N Range: 66W Meridian: 6

Latitude: 40.379270 Longitude: -104.805370

CORRECTIVE ACTIONS:

1 CA# 122203

Corrective Action: Securely fasten all valves, pipes, and fittings to ensure good mechanical condition, inspect at regular intervals and maintain in good mechanical condition per Rule 605.d.

Date: 03/01/2019

Response: CA COMPLETED

Date of Completion: 02/07/2019

Operator Comment: Corrective action handled. Photo attached

COGCC Decision: _____

COGCC
Representative:

2 CA# 122204

Corrective Action: Install sign to comply with Rule 210.e.

Date: 03/31/2019

Response: CA COMPLETED

Date of Completion: 02/07/2019

Operator
Comment:

Sign installed. Photo attached.

COGCC Decision: _____

COGCC
Representative:

OPERATOR COMMENT AND SUBMITTAL

Comment: Attn: Brittani Santistevan

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

Print Name: Amy Hilim

Signed: _____

Title: Administrative Assistant

Date: 2/7/2019 12:04:58 PM

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>
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401932287	Photo
401932289	Contact Info Photo

Total Attach: 2 Files