

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:

402303640

Date Received:

02/05/2020

FIR RESOLUTION FORM

Overall Status: CAC

CA Summary:

3 of 3 CAs from the FIR responded to on this Form

3 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

KIMBERLY MOLLENHAUER

Phone

9703045307

Email

KIMBERLY.MOLLENHAUER@NBLENERGY.COM

COGCC INSPECTION SUMMARY:

FIR Document Number: 696501512

Inspection Date: 01/13/2020

FIR Submit Date: 01/13/2020

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: 332415

Location Name: EATON-64N66W Number: 19NWSW County: WELD

Qtrqr: NWS Sec: 19 Twp: 4N Range: 66W Meridian: 6
W

Latitude: 40.294892 Longitude: -104.827728

FACILITY - API Number: 05-123- -00 Facility ID: 272713

Facility Name: EATON Number: 12-19

Qtrqr: NWS Sec: 19 Twp: 4N Range: 66W Meridian: 6
W

Latitude: 40.294892 Longitude: -104.827728

CORRECTIVE ACTIONS:

1 CA# 135924

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

Date: 02/17/2020

Response: CA COMPLETED

Date of Completion: 02/03/2020

Operator Comment: NOBLE INSTALLED THE SIGN AT THE WELLHEAD.

COGCC Decision: _____

COGCC
Representative:

2 CA# 135925

Corrective Action: Comply with Rule 603.f .

Date: 02/17/2020

Response: CA COMPLETED

Date of Completion: 02/03/2020

Operator
Comment:

NOBLE REMOVED THE WEEDS AROUND THE WELLHEAD.

COGCC Decision: _____

COGCC
Representative:

3 CA# 135926

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

Date: 02/17/2020

Response: CA COMPLETED

Date of Completion: 02/03/2020

Operator
Comment:

NOBLE INSTALED THE SIGN AND EMERGENCY NUMBER AT THE WELLHEAD.

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: KIMBERLY MOLLENHAUER

Signed: _____

Title: EHS TECH

Date: 2/5/2020 9:22:04 AM

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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Total Attach: 0 Files