

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:  
403088900

Date Received:  
06/24/2022

FIR RESOLUTION FORM

Overall Status:

CA Summary:

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

1 CA Completed  
0 Factual Review Request

OPERATOR INFORMATION

OGCC Operator Number: 100322

Name of Operator: NOBLE ENERGY INC

Address: 2001 16TH STREET SUITE 900

City: DENVER State: CO Zip: 80202

Contact Name and Telephone:

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

Phone: ( ) Fax: ( )

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

Additional Operator Contact:

Contact Name

Phone

Email

Morgan, John

[rbucogccinspectionreports@chevron.onmicrosoft.com](mailto:rbucogccinspectionreports@chevron.onmicrosoft.com)

[john.morgan@state.co.us](mailto:john.morgan@state.co.us)

COGCC INSPECTION SUMMARY:

FIR Document Number: 696304262

Inspection Date: 06/16/2022

FIR Submit Date: 06/16/2022

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

Inspected Operator Information:

Company Name: NOBLE ENERGY INC

Company Number: 100322

Address: 2001 16TH STREET SUITE 900

City: DENVER State: CO Zip: 80202

LOCATION - Location ID: 326919

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

Qtrqtr: SENE Sec: 8 Twp: 8N Range: 58W Meridian: 6

Latitude: 40.679050 Longitude: -103.879360

FACILITY - API Number: 05-123-00 Facility ID: 246065

Facility Name: LILLI UNIT Number: 8-8

Qtrqtr: SENE Sec: 8 Twp: 8N Range: 58W Meridian: 6

Latitude: 40.679050 Longitude: -103.879360

CORRECTIVE ACTIONS:

1 CA# 162748

Corrective Action: Comply with Rule 1004.a

Date: 07/18/2022

Response: CA COMPLETED

Date of Completion: 06/23/2022

Operator Comment: 06/23/22, I Spoke with Erica at the COGCC, with the gas line being a third-party live gas line and with the request from the National Forest Service for us to not proceed at this time due to wildlife issues and concerns in the area, she agreed to give us until Oct to complete the CA's. Per her guidance I will close them out in FIRR with these notes.

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: Wes Larimore

Signed: \_\_\_\_\_

Title: HSE \_\_\_\_\_

Date: 6/24/2022 9:41:18 AM \_\_\_\_\_

**ATTACHMENT LIST**

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

**Document Number**      **Description**

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Total Attach: 0 Files