

FORM

12

Rev
02/20

State of Colorado

Oil and Gas Conservation Commission

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

FOR OGCC USE ONLY

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Receive Date:

05/01/2023

GAS FACILITY REGISTRATION/CHANGE OF OPERATOR

Per Rule 313B.a and Rule 313B.b, a Form 12 is required to register a new Gas Gathering System, Gas Compressor Station, Gas Processing Plant, or Underground Gas Storage Facility. Financial Assurance is required per Rule 711. Per Rule 313B.c, a Form 12 is required for an annual report of changes to a Gas Gathering System, Gas Compressor Station, Gas Processing Plant, or Underground Gas Storage Facility. Per Rule 313B.d, a Form 12 is required to report the transfer of ownership of a Gas Gathering System, Gas Compressor Station, Gas Processing Plant, or Underground Gas Storage Facility.

Purpose of Form: (Select one)

New Registration ☐Annual Report of Changes ☒Change of Operator ☐

Name of Operator: NOBLE ENERGY INC

OGCC Operator Number: 100322 Suff:

One Call Participation (One box must be checked.)

☒ In checking this box, the Submitting Operator hereby confirms Tier One membership in the Utility Notification Center of Colorado (CO 811) and participation in Colorado's One Call notification system. [Rule 1102.n.]☐ In checking this box, the Operator hereby certifies it has no underground facilities and is exempt from CO 811 membership. [Rule 1102.n. (2)]

Address: 2001 16TH STREET SUITE 900

City: DENVER State: CO Zip: 80202

Contact Name: Mosiah Montoya
First Name Last Name

Phone: 303 228-4000 Email: denverregulatory@chevron.onmicrosoft.com

NON-Submitting Operator Information:

COGCC Number of Non-Submitting : Name of Non-Submitting:

Non-Submitting Operator is : Contact Name :

Title: Non-Submitting Operator Contact Email:

FACILITY INFORMATION

Facility Name and Number: EAST PONY GAS GATHERING SYSTEM

COGCC Facility ID: 473945

**A separate Form 12 must be submitted for each facility or each component of a gathering system.
Select the type of facility below.**

TYPE OF FACILITY Gas Compressor Station ☐ Gas Processing Plant ☐
(Select one) Gas Gathering Pipeline System ☒ Underground Gas Storage ☐

Estimated Daily Processing Total: 24.22 MMSCFPD

Gas Compressor Station – Number of Compressors: _____

Financial Assurance: Gas Facility Surety ID# 20220102

Surface Ownership: Fee ☐ State ☐ Federal ☒ Indian ☐

Facility Location

- Provide a legal location and the latitude and longitude of that location.
- Provide the GPS data for the latitude and longitude of the legal location.
- When one exists, provide the street address of the facility.
- For a Gas Gathering Pipeline System or an Underground Gas Storage Facility use sections, townships, ranges and counties to describe the geographic area covered by the system or facility.

Legal Location: QTRQTR NWNW Sec 21 Twp 9N Rng 61W Meridian 6

County WELD

Latitude 40.730623 Longitude -104.216807

GPS Data (if available): PDOP Reading _____

Date of Measurement _____ GPS Instrument Operator's Name _____

Facility Address (if exists) 50990 CR 89
City Briggsdale State CO Zip 80611

Gas Gathering Pipeline System or Underground Gas Storage Facility - Description of Geographic Area:

T7N R59W Sec 4, 9, 15, 22, 23, 26 T7N R62W Sec 1, 2, 3, 4, 5, 6 T7N R63W Sec 1, 2, 3, 4, 5, 6, 7, 8, 9, 19, 11, 12, 14, 15, 16, 17, 18, 19, 23 T8N R58W Sec 4, 5, 6, 7, 8, 9, 17, 18, 20, 21, 28 T8N R59W Sec 1, 2, 3, 4, 8, 9, 10, 11, 12, 13, 14, 15, 16, 17, 19, 20, 21, 22, 24, 26, 28, 29, 33, 34 T8N R60W, Sec 4, 5, 6, 7, 13, 14, 18, 19, 23, 24 T8N R61W, Sec 1, 2 T8N R63W Sec 20, 21, 22, 25, 26, 27, 31, 32, 33, 34, 35 T9N R58W, Sec 1, 2, 3, 4, 5, 6, 7, 9, 10, 11, 12, 14, 15, 16, 17, 18, 19, 20, 21, 22, 23, 26, 28, 33, 36 T9N R59W
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Related Gas Gathering Pipeline System

For a Gas Processing Plant or a Gas Compressor Station that is part of a Gas Gathering Pipeline System:

If the Gas Gathering Pipeline System is registered, enter the Facility ID of that system: _____

If the Gas Gathering Pipeline System is NOT registered, enter the Form 12 Document Number submitted to register that system: _____

CHANGE OF OPERATOR

Effective Date of Change: _____ Form is being submitted by: _____

☐ The Buying Operator is a Tier One membership in the Utility Notification Center of Colorado (CO 811) and participates in Colorado's One Call notification system. [Rule 1102.n.]

☐ The Buying Operator has no underground facilities and is exempt from CO 811 membership. [Rule 1102.n.(2)]

Name of Buying Operator:	Name of Selling Operator:
Buying Operator COGCC Number:	Selling Operator COGCC Number:
Print Name:	Print Name:
Signature:	Signature:
Title:	Title:
Date:	Date:

Operator Comments:

No Changes in 2022

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

SUMMITTED BY:

Signed: _____ Print Name: Julie Webb

Title: Sr. Regulatory Analyst Email: julie.webb@chevron.com Date: 5/1/2023

COGCC Approved:

Date:

FACILITY ID:	473945
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Condition of Approval

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
		Stamp Upon Approval

Total: 0 comment(s)

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
		Stamp Upon Approval

Total: 0 comment(s)

Signature: _____

Attachment List

<u>Att Doc Num</u>	<u>Name</u>

Total Attach: 0 Files