

State of Colorado
Energy & Carbon Management Commission

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



Document Number:
403487203

Date Received:
08/04/2023

FIR RESOLUTION FORM

Overall Status: CAC

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

*

rbucogccinspectionreports@chevron.onmicrosoft.com

COGCC INSPECTION SUMMARY:

FIR Document Number: 707601454

Inspection Date: 07/06/2023

FIR Submit Date: 07/07/2023

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: 420631

Location Name: KLEIN Number: B16-99HZ County: WELD

Qtrqtr: SESE Sec: 16 Twp: 5N Range: 64W Meridian: 6

Latitude: 40.392960 Longitude: -104.548470

FACILITY - API Number: 05-123- -00 Facility ID: 420633

Facility Name: KLEIN Number: B16-98HZ

Qtrqtr: SESE Sec: 16 Twp: 5N Range: 64W Meridian: 6

Latitude: 40.392960 Longitude: -104.548470

CORRECTIVE ACTIONS:

1 ☒ CA# 174852

Corrective Action: *Post sign w/ Emergency number at wellsite.
Comply with Rule 605.d.
Or Cut/Cap well & remove well fencing.
Corrective Action date: 08/07/2023. (30-days).
See photo #1.
*Attach photo(s) to FIRR to verify Corrective Action(s) have been resolved.

Date: 08/07/2023

Response: CA COMPLETED

Date of Completion: 08/02/2023

Operator Comment: Complied with Rule 605.d.

COGCC Decision: Approved via an AMI

COGCC Representative: Field Inspection Report doc. #707601655 (AMI), confirms sign w/ Emergency # posted at wellsite. Corrective Action has been resolved.

OPERATOR COMMENT AND SUBMITTAL

Comment: Complied with Rule 605.d.

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

Print Name: Javier Pellacani

Signed: _____

Title: HSE

Date: 8/4/2023 1:55:42 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>
403487203	FIR RESOLUTION SUBMITTED
403487216	pic

Total Attach: 2 Files