

State of Colorado
Energy & Carbon Management Commission



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Document Number:
403640174

Date Received:
12/29/2023

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

Binschus, Chris

rbucogccinspectionreports@chevron.onmicrosoft.com

chris.binschus@state.co.us

COGCC INSPECTION SUMMARY:

FIR Document Number: 713900140

Inspection Date: 11/28/2023

FIR Submit Date: 12/05/2023

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: 329077

Location Name: HSR-O'NEIL-65N66W Number: 29SESE County: WELD

Qtrqtr: SESE Sec: 29 Twp: 5N Range: 66W Meridian: 6

Latitude: 40.364660 Longitude: -104.795940

FACILITY - API Number: 05-123- -00 Facility ID: 249033

Facility Name: HSR-O'NEIL Number: 16-29

Qtrqtr: SESE Sec: 29 Twp: 5N Range: 66W Meridian: 6

Latitude: 40.364660 Longitude: -104.795940

CORRECTIVE ACTIONS:

1 CA# 188888

Corrective Action: Perform reclamation in accordance with Rule 1004. Reseed disturbance areas using a seed mixture requested by the surface owner, or a mixture prescribed by the local county NRCS. Establish vegetation with total perennial, non-invasive uniform plant cover of at least eighty (80) percent of reference area levels. Ensure erosion controls are implemented to stabilize the seeded soil. Operator shall continue to monitor and manage this site until the location meets Rule 1004 standards, including stormwater and weed management.

Date: 11/28/2023

Response: CA COMPLETED

Date of Completion: 12/19/2023

Operator
Comment: complied with rule 1004

COGCC Decision: _____

COGCC
Representative: _____

OPERATOR COMMENT AND SUBMITTAL

Comment: Complied with rule 1004 please see attached photo

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

Print Name: Isaiah Flores

Signed: _____

Title: HSE

Date: 12/29/2023 12:08:18 PM

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: 7 Files