

State of Colorado Energy & Carbon Management Commission



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Document Number:
403645250

Date Received:
01/04/2024

FIR RESOLUTION FORM

Overall Status:

CA Summary:

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

2 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: 708200775

Inspection Date: 12/20/2023

FIR Submit Date: 12/26/2023

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: 427008

Location Name: State 8-60 Number: 16-2H County: _____

Qtrqtr: NW Sec: 16 Twp: 8N Range: 60W Meridian: 6
NW

Latitude: 40.668813 Longitude: -104.103220

FACILITY - API Number: 05-123- -00 Facility ID: 427008

Facility Name: State 8-60 Number: 16-2H

Qtrqtr: NW Sec: 16 Twp: 8N Range: 60W Meridian: 6
NW

Latitude: 40.668813 Longitude: -104.103220

CORRECTIVE ACTIONS:

1 CA# 189538

Corrective Action: Properly dispose of oily waste in accordance with Rule 905.e. The location will remain out of compliance until the corrective action has been resolved.

Date: 12/20/2023

Response: CA COMPLETED

Date of Completion: 01/04/2024

Operator Comment: Complied with Rule 905.e.

COGCC Decision: _____

COGCC Representative: _____

2 CA# 189539

Corrective Action: Comply with Rule 606 and remove any unused equipment. The location will remain out of compliance until the corrective action has been resolved.

Date: 12/20/2023

Response: CA COMPLETED

Date of Completion: 01/04/2024

Operator Comment: Complied with Rule 606.

COGCC Decision: _____

COGCC Representative: _____

OPERATOR COMMENT AND SUBMITTAL

Comment: Complied with rules 905.e. and 606 on location.

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: 1/4/2024 4:05:25 PM

ATTACHMENT LIST

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

Document Number	Description
403645283	Location Photo
403645284	Location Photo
403645285	Location Photo

Total Attach: 3 Files