

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:
403702421

Date Received:
02/28/2024

FIR RESOLUTION FORM

Overall Status:

CA Summary:

2 of 2 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: 1099 18TH STREET SUITE 1500

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: 696305945

Inspection Date: 02/11/2024

FIR Submit Date: 02/11/2024

FIR Status: _____

Inspected Operator Information:

Company Name: NOBLE ENERGY INC

Company Number: 100322

Address: 1099 18TH STREET SUITE 1500

City: DENVER State: CO Zip: 80202

LOCATION - Location ID: 431817

Location Name: SHABLE FEDERAL LB Number: 29-62HN County: _____

Qtrqtr: NWN Sec: 33 Twp: 9N Range: 60W Meridian: 6
W

Latitude: 40.712503 Longitude: -104.106417

FACILITY - API Number: 05-123- -00 Facility ID: 431817

Facility Name: SHABLE FEDERAL LB Number: 29-62HN

Qtrqtr: NWN Sec: 33 Twp: 9N Range: 60W Meridian: 6
W

Latitude: 40.712503 Longitude: -104.106417

CORRECTIVE ACTIONS:

1 CA# 191957

Corrective Action: Install sign to comply with Rule 605.h.

Date: 03/11/2024

Response: CA COMPLETED

Date of Completion: 02/12/2024

Operator Comment: complied with 605.h. please see attached photo

COGCC Decision: _____

COGCC
Representative:

2 CA# 191958

Corrective Action: Comply with Rule 606

Date: 03/11/2024

Response: CA COMPLETED

Date of Completion: 02/12/2024

Operator
Comment:

complied with 606 please see attached photo

COGCC Decision: _____

COGCC
Representative:

OPERATOR COMMENT AND SUBMITTAL

Comment: complied with 606 and 605.h. 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: 2/28/2024 1:22:02 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>
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403702426	pic
403702428	pic

Total Attach: 2 Files