

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:

403800123

Date Received:

05/22/2024

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

ECMC 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

+

NBL_DJBU_Inspections@NBLENERGY.COM

+

rbucogccinspectionreports@chevron.onmicrosoft.com

+

nbl_djbu_inspections@nbleenergy.com

ECMC INSPECTION SUMMARY:

FIR Document Number: 694100361

Inspection Date: 05/10/2024

FIR Submit Date: 05/16/2024

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: 319343

Location Name: UNION COLONY

Number: I26-01

County:

Qtrqtr: SENE

Sec: 26

Twp: 6N

Range: 66W

Meridian: 6

Latitude: 40.462560

Longitude: -104.737220

FACILITY - API Number: 05-123-

-00

Facility ID: 319343

Facility Name: UNION COLONY

Number: I26-01

Qtrqtr: SENE

Sec: 26

Twp: 6N

Range: 66W

Meridian: 6

Latitude: 40.462560

Longitude: -104.737220

CORRECTIVE ACTIONS:

1 CA# 195229

Corrective Action: Comply with Rule 606

Date: 05/30/2024

Response: CA COMPLETED

Date of Completion: 05/21/2024

Operator Comment: Complied with Rule 606.

ECMC Decision: _____

ECMC
Representative:

2 CA# 195230

Corrective Action: Install or repair required BMPs per Rule 1002.f.(2)C

Date: 05/30/2024

Response: CA COMPLETED

Date of Completion: 05/21/2024

Operator
Comment:

Complied with Rule 1002.f.(2)C.

ECMC Decision: _____

ECMC
Representative:

OPERATOR COMMENT AND SUBMITTAL

Comment: Completed both corrective actions.

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

Print Name: Jeff White

Signed: _____

Title: HSE

Date: 5/22/2024 10:55:56 AM

ATTACHMENT LIST

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

<u>Document Number</u>	<u>Description</u>
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403800135	photos
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Total Attach: 1 Files