

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:  
403903833

Date Received:  
08/28/2024

## FIR RESOLUTION FORM

### Overall Status:

#### CA Summary:

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

1 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

+

[rbucogccinspectionreports@chevron.com](mailto:rbucogccinspectionreports@chevron.com)

WHITE, JEFFERY

[jeffery.white@chevron.com](mailto:jeffery.white@chevron.com)

### ECMC INSPECTION SUMMARY:

FIR Document Number: 708201427

Inspection Date: 07/23/2024

FIR Submit Date: 07/24/2024

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: 483510

Location Name: A07-01 Number: Pad County: \_\_\_\_\_

Qtrqtr: NENE Sec: 7 Twp: 6N Range: 64W Meridian: 6

Latitude: 40.505380 Longitude: -104.585200

#### FACILITY - API Number: 05-123-00 Facility ID: 483510

Facility Name: A07-01 Number: Pad

Qtrqtr: NENE Sec: 7 Twp: 6N Range: 64W Meridian: 6

Latitude: 40.505380 Longitude: -104.585200

### CORRECTIVE ACTIONS:

2 CA# 196875

Corrective Action: Comply with Rule 1002.c.

Date: \_\_\_\_\_

Response: CA COMPLETED

Date of Completion: 08/28/2024

Operator  
Comment: Complying with Rule 1002.c.

ECMC Decision: \_\_\_\_\_

ECMC  
Representative:

**OPERATOR COMMENT AND SUBMITTAL**

Comment: Area is being managed for weeds, tire tracks have been fixed. Site is being monitored and maintained according to the season. As soon as temperatures cool off, the site will be re-seeded.

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: 8/28/2024 1:02:03 PM

**ATTACHMENT LIST**

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

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