

State of Colorado
Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203
Phone: (303) 894-2100 Fax: (303) 894-2109



Document Number:

401489698

Date Received:

12/18/2017

FIR RESOLUTION FORM

Overall Status: CAC

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: 1001 NOBLE ENERGY WAY

City: HOUSTON State: TX Zip: 77070

Contact Name and Telephone:

Name: _____

Phone: () _____ Fax: () _____

Email: _____

Additional Operator Contact:

Contact Name

Tesla Dougherty

Phone

970-304-5245

Email

tesla.dougherty@nblenergy.com

COGCC INSPECTION SUMMARY:

FIR Document Number: 684904758

Inspection Date: 12/12/2017

FIR Submit Date: 12/12/2017

FIR Status: _____

Inspected Operator Information:

Company Name: NOBLE ENERGY INC

Company Number: 100322

Address: 1001 NOBLE ENERGY WAY

City: HOUSTON State: TX Zip: 77070

LOCATION - Location ID: 322962

Location Name: DR-65N64W Number: 10SWSW County: _____

Qtrqr: SWS Sec: 10 Twp: 5N Range: 64W Meridian: 6
W

Latitude: 40.408350 Longitude: -104.543200

FACILITY - API Number: 05-123- -00 Facility ID: 322962

Facility Name: DR-65N64W Number: 10SWSW

Qtrqr: SWS Sec: 10 Twp: 5N Range: 64W Meridian: 6
W

Latitude: 40.408350 Longitude: -104.543200

CORRECTIVE ACTIONS:

1 CA# 113342

Corrective Action: Securely fasten all valves, pipes, and fittings to ensure good mechanical condition, inspect at regular intervals and maintain in good mechanical condition per Rule 605.d. (24 hr CA)

Date: 12/13/2017

Response: CA COMPLETED

Date of Completion: 12/12/2017

Noble has repaired the leak at the wellhead.

Operator
Comment:

COGCC Decision:

COGCC
Representative:

2 CA# 113343

Corrective Action: Comply with Rule 603.f .

Date: 01/12/2018

Response: CA COMPLETED

Date of Completion: 12/14/2017

Operator
Comment:

The unused fencing has been removed from location.

COGCC Decision:

COGCC
Representative:

OPERATOR COMMENT AND SUBMITTAL

Comment:

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

Print Name: Tesla Dougherty

Signed:

Title: EHS Specialist

Date: 12/18/2017 1:35:05 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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Total Attach: 0 Files