

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:  
401690995  
Date Received:  
07/02/2018

FIR RESOLUTION FORM

CA Summary:

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

1 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

Phone

Email

Jacob Evans

970-304-5329

jacob.evans@nbleenergy.com

COGCC INSPECTION SUMMARY:

FIR Document Number: 690100605

Inspection Date: 06/20/2018

FIR Submit Date: 06/25/2018

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: 330386

Location Name: HSR-FOSTER-63N65W Number: 35NWNW County: WELD

Qtrqtr: NWN Sec: 35 Twp: 3N Range: 65W Meridian: 6

Latitude: 40.187772 Longitude: -104.638603

FACILITY - API Number: 05-123- -00 Facility ID: 251204

Facility Name: HSR-FOSTER Number: 4-35

Qtrqtr: NWN Sec: 35 Twp: 3N Range: 65W Meridian: 6

Latitude: 40.187772 Longitude: -104.638603

CORRECTIVE ACTIONS:

1 ☒ CA# 116959

Corrective Action: Email information as requested and update supplemental form 19 to include the following:  
Document the root cause of flowline failure resulting in the release, measures taken to prevent the problem from reoccurring and description of flowline repairs completed (\*add information/ complete the CA section of the supplemental form 19).

Date: 07/23/2018

Response: CA COMPLETED

Date of Completion: 07/02/2018

Corrective Actions Completed.

Operator  
Comment:

COGCC Decision: Approved

COGCC  
Representative:

Corrective Actions from FIR Doc #690100605 have been completed.

OPERATOR COMMENT AND SUBMITTAL

Comment: Corrective Actions Completed.

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

Print Name: Jacob Evans

Signed: \_\_\_\_\_

Title: Environmental Coordinator

Date: 7/2/2018 8:42:35 AM

**ATTACHMENT LIST**

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

**Document Number**      **Description**

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|-----------|--------------------------|
| 401690995 | FIR RESOLUTION SUBMITTED |
|-----------|--------------------------|

Total Attach: 1 Files