

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:

401878469

Date Received:

12/18/2018

FIR RESOLUTION FORM

Overall Status: CAC

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

Jacob Evans

Phone

970-304-5329

Email

jacob.evans@nbleenergy.com

COGCC INSPECTION SUMMARY:

FIR Document Number: 679300025

Inspection Date: 12/03/2018

FIR Submit Date: 12/04/2018

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: 323736

Location Name: HAMBERT R G-64N65W Number: 32NENE County: _____

Qtrqr: NENE Sec: 32 Twp: 4N Range: 65W Meridian: 6

Latitude: 40.274466 Longitude: -104.680481

FACILITY - API Number: 05-123- -00 Facility ID: 323736

Facility Name: HAMBERT R G-64N65W Number: 32NENE

Qtrqr: NENE Sec: 32 Twp: 4N Range: 65W Meridian: 6

Latitude: 40.274466 Longitude: -104.680481

CORRECTIVE ACTIONS:

1 CA# 120765

Corrective Action: Submit a Form 27 Site Investigation and Remediation Workplan for the removal of a buried/partially buried produced water vessel in accordance with Rule 905.b. The Form 27 Workplan may be submitted with the excavation and site assessment results, but should be submitted no later than 90 days from the Spill Report Date in order to resolve this release. The Form 27 for this release is due by 12/23/2018.

Date: 12/23/2018

Response: CA COMPLETED

Date of Completion: 12/07/2018

Operator
Comment:

Form 27 Submitted

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: Jacob Evans

Signed:

Title: Environmental Coordinator

Date: 12/18/2018 9:36:57 AM

ATTACHMENT LIST

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

Document Number **Description**

401878471	Approved Form 27
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Total Attach: 1 Files