

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:

402139410

Date Received:

08/09/2019

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

Tesla Dougherty

Phone

970-304-5245

Email

tesla.dougherty@nblenergy.com

COGCC INSPECTION SUMMARY:

FIR Document Number: 696300282

Inspection Date: 06/26/2019

FIR Submit Date: 06/26/2019

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: 306368

Location Name: WEST IRRIGATION-USX AB-67N64W Number: 33NWSE County: WELD

Qtrqtr: NWSE Sec: 33 Twp: 7N Range: 64W Meridian: 6

Latitude: 40.527312 Longitude: -104.553542

FACILITY - API Number: 05-123-00 Facility ID: 288210

Facility Name: WEST IRRIGATION-USX AB Number: 33-10

Qtrqtr: NWSE Sec: 33 Twp: 7N Range: 64W Meridian: 6

Latitude: 40.527312 Longitude: -104.553542

CORRECTIVE ACTIONS:

1 CA# 126488

Corrective Action: Comply with Rule 603.f .

Date: 07/10/2019

Response: CA COMPLETED

Date of Completion: 07/11/2019

Operator Comment: Weeds cleared out from wellhead

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: 8/9/2019 10:45:36 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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Total Attach: 0 Files