

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:
402332843

Date Received:
03/05/2020

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

Phone

Email

Kraich, Adam

adam.kraich@state.co.us

NBL_DJBU_Inspections@NBLENERGY.COM

COGCC INSPECTION SUMMARY:

FIR Document Number: 696301436

Inspection Date: 02/25/2020

FIR Submit Date: 02/25/2020

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: 439896

Location Name: Remora Number: LC34-745 Pad County: _____

Qtrqtr: NWNE Sec: 34 Twp: 9N Range: 59W Meridian: 6

Latitude: 40.712050 Longitude: -103.959830

FACILITY - API Number: 05-123-00 Facility ID: 439896

Facility Name: Remora Number: LC34-745 Pad

Qtrqtr: NWNE Sec: 34 Twp: 9N Range: 59W Meridian: 6

Latitude: 40.712050 Longitude: -103.959830

CORRECTIVE ACTIIONS:

1 CA# 136708

Corrective Action: Comply with Rule 210.b.

Date: 03/25/2020

Response: CA COMPLETED

Date of Completion: 03/04/2020

Operator Comment: NOBLE INSTALLED THE WELLHEAD SIGN AT HALEY LC27-711.

COGCC Decision: Approved pending re-inspection

COGCC Representative: Approved pending re-inspection

2 CA# 136709

Corrective Action: Comply with Rule 603.f.

Date: 03/25/2020

Response: CA COMPLETED

Date of Completion: 02/28/2020

Operator Comment: NOBLE REMOVED THE UNUSED CHEMICAL TANK FROM HALEY LC27-711 AND 715 WELLHEADS.

COGCC Decision: Approved pending re-inspection

COGCC Representative: Approved pending re-inspection

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: KIMBERLY MOLLENHAUER

Signed: _____

Title: EHS TECH

Date: 3/5/2020 6:21:29 AM

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>
402332843	FIR RESOLUTION SUBMITTED

Total Attach: 1 Files