

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:
402352521

Date Received:
03/26/2020

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
.		<u>NBL_DJBU_Inspections@NBLENERGY.COM</u>

COGCC INSPECTION SUMMARY:

FIR Document Number: 697501165

Inspection Date: 02/25/2020

FIR Submit Date: 02/27/2020

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: 333200

Location Name: BORESEN-65N67W Number: 12SENE County: WELD

Qtrqr: SENE Sec: 12 Twp: 5N Range: 67W Meridian: 6

Latitude: 40.415919 Longitude: -104.834547

FACILITY - API Number: 05-123-00 Facility ID: 244179

Facility Name: BORESEN Number: 1

Qtrqr: SENE Sec: 12 Twp: 5N Range: 67W Meridian: 6

Latitude: 40.415919 Longitude: -104.834547

CORRECTIVE ACTION:

1 CA# 136754

Corrective Action: Comply with Rule 603.f .

Date: 03/26/2020

Response: CA COMPLETED

Date of Completion: 03/23/2020

Operator Comment: The unused tubing was originally left for the landowner. Noble confirmed that the landowner had moved the tubing off of location.

COGCC Decision: _____

COGCC
Representative:

2 CA# 136755

Corrective Action: Comply with Rule 311.b. to submit the required Form 6 for wells 123-25531 and 123-25532. Corrective action date is being back dated to when the last Form 6 should have been submitted.

Date: 06/28/2019

Response: CA COMPLETED

Date of Completion: 03/25/2020

Operator Comment: The form 6 was filed on 7/29/2019 and approved on 11/19/2019. The state document ID is 402125588.

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: KIMBERLY MOLLENHAUER

Signed: _____

Title: EHS TECH

Date: 3/26/2020 7:04:09 AM

ATTACHMENT LIST

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

Document Number **Description**

<u>Document Number</u>	<u>Description</u>

Total Attach: 0 Files