

State of Colorado
Oil and Gas Conservation Commission

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Phone: (303) 894-2100 Fax: (303) 894-2109



Document Number:
402704982

Date Received:
06/01/2021

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

COGCC INSPECTION SUMMARY:

FIR Document Number: 697502476

Inspection Date: 01/20/2021

FIR Submit Date: 01/25/2021

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: 423929

Location Name: MONTANA STATE PC LG Number: 16-68HN County: _____

Qtrqr: NWN Sec: 16 Twp: 8N Range: 59W Meridian: 6
W

Latitude: 40.667400 Longitude: -103.990000

FACILITY - API Number: 05-123- -00 Facility ID: 423929

Facility Name: MONTANA STATE PC LG Number: 16-68HN

Qtrqr: NWN Sec: 16 Twp: 8N Range: 59W Meridian: 6
W

Latitude: 40.667400 Longitude: -103.990000

CORRECTIVE ACTIONS:

1 CA# 146103

Corrective Action: Comply with Rule 1004. Reseed disturbance areas using a seed mixture requested by the surface owner, or a mixture prescribed by the local county NRCS. Establish vegetation with total perennial, non-invasive uniform plant cover of at least eighty (80) percent of reference area levels. Ensure erosion controls are implemented to stabilize the seeded soil. Operator shall continue to monitor and manage this site until the location meets Rule 1004 standards, including stormwater and weed management.

Revegetation activities shall be complete no later than 4/12/2021 or as soon as environmental conditions will permit.

Date: 04/12/2021

Response: CA COMPLETED

Date of Completion: 06/01/2021

Operator Comment: Please see attached photos for completed revegetation activity.

COGCC Decision: Approved via an AMI

COGCC Representative: Approved via an AMI of this FIR resolution acknowledges the document and attachments were received. Based on the attached photos, Operator has completed the corrective action.

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: Alan Figurski Signed: _____

Title: WSS Date: 6/1/2021 11:14:13 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>
402704982	FIR RESOLUTION SUBMITTED
402704985	697502476 image 1
402704987	697502476 image 2

Total Attach: 3 Files