

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:
402719093

Date Received:
06/15/2021

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>
<u>Adamczyk, Megan</u>		<u>megan.adamczyk@state.co.us</u>
		<u>Greg.Synowka@nblenergy.com</u>

COGCC INSPECTION SUMMARY:

FIR Document Number: 697502670

Inspection Date: 03/10/2021

FIR Submit Date: 03/18/2021

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: 461262

Location Name: Roskop Number: _____ County: _____

Qtrqtr: NENE Sec: 10 Twp: 4N Range: 64W Meridian: 6

Latitude: 40.333900 Longitude: -104.527500

FACILITY - API Number: 05-123-00 Facility ID: 461262

Facility Name: Roskop Number: _____

Qtrqtr: NENE Sec: 10 Twp: 4N Range: 64W Meridian: 6

Latitude: 40.333900 Longitude: -104.527500

CORRECTIVE ACTIONS:

1 CA# 147518

Corrective Action: Comply with Rule 1004 standards to properly contour the tank battery location and perform additional final reclamation activities, including but not limited to seeding.

Collaborate with the landowner to determine mitigating measures that will allow reclamation work to be conducted in such a manner as to not interfere with agricultural activities or crop production.

There is no corrective action date because this may be referred to Enforcement.

Date: _____

Response: CA COMPLETED

Date of Completion: 06/14/2021

Operator Comment: Reclamation activities have been completed.

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: Alan Figurski

Signed: _____

Title: WSS

Date: 6/15/2021 12:50:08 PM

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>
402719098	img 1
402719099	img 2
402719100	img 3
402719101	img 4

Total Attach: 4 Files