

State of Colorado Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203
Phone: (303) 894-2100 Fax: (303) 894-2109



OGCC RECEPTION

Receive Date:

06/25/2021

Document Number:

402730321

FIELD OPERATIONS NOTICE

The Form 42 shall be submitted as required by Rule, Notice to Operators, Policy, or Condition of Approval. A Form 42 Update shall be submitted to revise the scheduled date or time on a previous Form 42 - Advance Notice of Field Operations. A Form 42 Update must be for the same well, location, or facility and for the same Field Operation as a previous Form 42. NOTE: Operator's Contact for Advance Notices of Field Operations should be available 24 hours a day, 7 days a week and should have the most current scheduling information for the operation. Operator's Contact for other notices should be able to respond to questions regarding the reported information.

Update of a previous Form 42 Notice NO

Entity Information

| | |
|---|------------------------------------|
| OGCC Operator Number: <u>100322</u> | Contact Person: <u>Mat Rice</u> |
| Company Name: <u>NOBLE ENERGY INC</u> | Phone: <u>(970) 304-5013</u> |
| Address: <u>1001 NOBLE ENERGY WAY</u> | Fax: <u>()</u> |
| City: <u>HOUSTON</u> State: <u>TX</u> Zip: <u>77070</u> | Email: <u>Mat.rice@chevron.com</u> |

| | | |
|---|---|----------------------------|
| API #: <u>05 - 123 - 15426 - 00</u> | Facility ID: <u>247629</u> | Location ID: <u>336692</u> |
| Facility Name: <u>UPRR #21 PAN AM /N/ 1</u> | <input type="checkbox"/> Submit By Other Operator | |
| Sec: <u>31</u> Twp: <u>4N</u> Range: <u>65W</u> QtrQtr: <u>NWNW</u> | Lat: <u>40.274920</u> Long: <u>-104.713110</u> | |

NOTICE OF RETURN TO SERVICE

Check the appropriate Box Below.

Well

☒ The well will be returned to production on this date: 07/01/2021 [See Rules 417.b.(4) and 417.c.(4)]

OR

☐ The well will be returned to injection on this date: _____ [See Rules 417.b.(4) and 417.c.(4)]

I hereby certify all statements made in this form are, to the best of my knowledge, true, correct and complete.

| | |
|-------------------------------------|---|
| Print Name: <u>Rochelle Messick</u> | Email: <u>DenverRegulatory@chevron.com</u> |
| Signature: _____ | Title: <u>HSE Reg Affairs Coord</u> Date: <u>06/25/2021</u> |

