

FORM

12

Rev
02/20

State of Colorado

Oil and Gas Conservation Commission

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

FOR OGCC USE ONLY

Document Number:

403389101

Receive Date:

05/01/2023

GAS FACILITY REGISTRATION/CHANGE OF OPERATOR

Per Rule 313B.a and Rule 313B.b, a Form 12 is required to register a new Gas Gathering System, Gas Compressor Station, Gas Processing Plant, or Underground Gas Storage Facility. Financial Assurance is required per Rule 711. Per Rule 313B.c, a Form 12 is required for an annual report of changes to a Gas Gathering System, Gas Compressor Station, Gas Processing Plant, or Underground Gas Storage Facility. Per Rule 313B.d, a Form 12 is required to report the transfer of ownership of a Gas Gathering System, Gas Compressor Station, Gas Processing Plant, or Underground Gas Storage Facility.

Purpose of Form: (Select one)

New Registration ☐Annual Report of Changes ☒Change of Operator ☐

Name of Operator: NOBLE ENERGY INC

OGCC Operator Number: 100322 Suff:

One Call Participation (One box must be checked.)

☒ In checking this box, the Submitting Operator hereby confirms Tier One membership in the Utility Notification Center of Colorado (CO 811) and participation in Colorado's One Call notification system. [Rule 1102.n.]☐ In checking this box, the Operator hereby certifies it has no underground facilities and is exempt from CO 811 membership. [Rule 1102.n. (2)]

Address: 2001 16TH STREET SUITE 900

City: DENVER State: CO Zip: 80202

Contact Name: Mosiah Montoya
First Name Last Name

Phone: 303 228-4000 Email: denverregulatory@chevron.onmicrosoft.com

NON-Submitting Operator Information:

COGCC Number of Non-Submitting : Name of Non-Submitting:

Non-Submitting Operator is : Contact Name :

Title: Non-Submitting Operator Contact Email:

FACILITY INFORMATION			
Facility Name and Number:	MUSTANG GAS GATHERING SYSTEM	COGCC Facility ID:	456492
A separate Form 12 must be submitted for each facility or each component of a gathering system. Select the type of facility below.			
TYPE OF FACILITY (Select one)	Gas Compressor Station <input type="checkbox"/>	Gas Processing Plant <input type="checkbox"/>	
	Gas Gathering Pipeline System <input checked="" type="checkbox"/>	Underground Gas Storage <input type="checkbox"/>	
Estimated Daily Processing Total: 197.48		MMSCFPD	
Gas Compressor Station – Number of Compressors: 			
Financial Assurance: Gas Facility Surety ID#		20220102	
Surface Ownership:	Fee <input type="checkbox"/>	State <input checked="" type="checkbox"/>	Federal <input type="checkbox"/> Indian <input type="checkbox"/>

Surface Ownership: Fee ☐ State ☒ Federal ☐ Indian ☐

If the Gas Gathering Pipeline System is NOT registered, enter the Form 12 Document Number submitted to register that system:

Name of Buying Operator:	Name of Selling Operator:
Buying Operator COGCC Number:	Selling Operator COGCC Number:
Print Name:	Print Name:
Signature:	Signature:
Title:	Title:
Date:	Date:

Operator Comments:

One section of pipeline was added to the Mustang Gas gathering system. It is highlighted on the attached in red.
Segment ID: MUG-24-TLN-200-L1, In Service Date: 10/11/2022

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

SUMMITTED BY:

Signed: _____ Print Name: Julie Webb

Title: Sr. Regulatory Analyst Email: julie.webb@chevron.com Date: 5/1/2023

COGCC Approved:

Date:

FACILITY ID:	456492
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Condition of Approval

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
		Stamp Upon Approval

Total: 0 comment(s)

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
		Stamp Upon Approval

Total: 0 comment(s)

Signature: _____

Attachment List

<u>Att Doc Num</u>	<u>Name</u>
403390331	GEOGRAPHIC AREA MAP

Total Attach: 1 Files