

FORM

42

Rev
01/21State of Colorado
Energy & Carbon Management Commission1120 Lincoln Street, Suite 801, Denver, Colorado 80203
Phone: (303) 894-2100 Fax: (303) 894-2109

OGCC RECEPTION

Receive Date:

07/27/2023

Document Number:

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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>Raul Sanchez</u>
Company Name: <u>NOBLE ENERGY INC</u>	Phone: <u>(303) 8707730</u>
Address: <u>2001 16TH STREET SUITE 900</u>	Fax: <u>()</u>
City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80202</u>	Email: <u>DenverRegulatory@chevron.onmicrosoft.com</u>

API #: <u>05 - 123 - 48922 - 00</u>	Facility ID: <u>459527</u>	Location ID: <u>459534</u>
Facility Name: <u>Booth C35-725</u>	<input type="checkbox"/> Submit By Other Operator	
Sec: <u>2</u> Twp: <u>3N</u> Range: <u>64W</u> QtrQtr: <u>NWNE</u>	Lat: <u>40.260530</u>	Long: <u>-104.515060</u>

NOTICE OF HIGH BRADENHEAD PRESSURE DURING STIMULATION – Notify within 24 hours when bradenhead pressure increases more than 30% of the true vertical depth ("TVD") in feet of the surface casing shoe expressed in psig. This satisfies Rule 419 verbal notification requirements. Submit a follow-up Form 4 within 15 days.

Date of High Bradenhead Pressure: <u>07/26/2023</u>	Time: <u>16:00</u> (HH:MM)
Starting BrHd pressure: <u>0</u> psig	Highest BrHd pressure: <u>481</u> psig
Was this well being stimulated? <input type="checkbox"/>	

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

Print Name: <u>Raul Sanchez</u>	Email: <u>DenverRegulatory@chevron.onmicrosoft.com</u>
Signature: _____	Title: <u>Regulatory Specialist</u> Date: <u>07/27/2023</u>