

State of Colorado  
Energy & Carbon Management Commission



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

Document Number:  
403634004

Date Received:  
12/21/2023

## FIR RESOLUTION FORM

### Overall Status:

#### 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: 2001 16TH STREET SUITE 900

City: DENVER State: CO Zip: 80202

Contact Name and Telephone:

Name: \_\_\_\_\_

Phone: ( ) Fax: ( )

Email: \_\_\_\_\_

#### Additional Operator Contact:

Contact Name

Phone

Email

rbucogccinspectionreports@chevron.onmicrosoft.com

### COGCC INSPECTION SUMMARY:

FIR Document Number: 707602175

Inspection Date: 12/05/2023

FIR Submit Date: 12/08/2023

FIR Status: \_\_\_\_\_

#### Inspected Operator Information:

Company Name: NOBLE ENERGY INC

Company Number: 100322

Address: 2001 16TH STREET SUITE 900

City: DENVER State: CO Zip: 80202

#### LOCATION - Location ID: 305762

Location Name: MILE HIGH SHEEP-66N64W Number: 8NWSW County: WELD

Qtrqtr: NWS Sec: 8 Twp: 6N Range: 64W Meridian: 6

Latitude: 40.498220 Longitude: -104.581960

#### FACILITY - API Number: 05-123-00 Facility ID: 281938

Facility Name: MILE HIGH SHEEP Number: 8-32

Qtrqtr: NWS Sec: 8 Twp: 6N Range: 64W Meridian: 6

Latitude: 40.498220 Longitude: -104.581960

### CORRECTIVE ACTIONS:

1 CA# 189060

Corrective Action: \*Post sign w/ Emergency number at wellsite.

Comply with Rule 605.d.

Corrective Action date: 12/29/2023. (Original date).

See photo #1.

\*Attach photo(s) to FIRR to verify Corrective Action(s) have been resolved.

Date: 12/29/2023

Response: CA COMPLETED

Date of Completion: 12/06/2023

Complied with Rule 605.d.

Operator \_\_\_\_\_  
Comment: \_\_\_\_\_

COGCC Decision: \_\_\_\_\_

COGCC  
Representative: \_\_\_\_\_

OPERATOR COMMENT AND SUBMITTAL

Comment: \_\_\_\_\_  
Complied with Rule 605.d. Please see attach picture.

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

Print Name: \_\_\_\_\_  
Javier Pellacani

Signed: \_\_\_\_\_

Title: \_\_\_\_\_  
HSE

Date: \_\_\_\_\_  
12/21/2023 2:27:18 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> |
|------------------------|--------------------|
|------------------------|--------------------|

|           |            |
|-----------|------------|
| 403634008 | Sign Photo |
|-----------|------------|

Total Attach: 1 Files