

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:
403701214

Date Received:
02/27/2024

FIR RESOLUTION FORM

Overall Status:

CA Summary:

2 of 2 CAs from the FIR responded to on this Form

2 CA Completed
0 Factual Review Request

OPERATOR INFORMATION

OGCC Operator Number: 100322

Name of Operator: NOBLE ENERGY INC

Address: 1099 18TH STREET SUITE 1500

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: 696305890

Inspection Date: 02/01/2024

FIR Submit Date: 02/01/2024

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: 431556

Location Name: Wells Ranch USX AE Number: 31-1P Tank County: _____

Qtrqtr: NENE Sec: 31 Twp: 6N Range: 62W Meridian: 6

Latitude: 40.446850 Longitude: -104.360710

FACILITY - API Number: 05-123-00 Facility ID: 431556

Facility Name: Wells Ranch USX AE Number: 31-1P Tank

Qtrqtr: NENE Sec: 31 Twp: 6N Range: 62W Meridian: 6

Latitude: 40.446850 Longitude: -104.360710

CORRECTIVE ACTIONS:

1 CA# 191590

Corrective Action: Comply with Rule 606

Date: 02/16/2024

Response: CA COMPLETED

Date of Completion: 02/14/2024

Operator Comment: Complied with Rule 606

COGCC Decision: _____

COGCC
Representative: _____

2 CA# 191591

Corrective Action: Securely fasten all valves, pipes, fittings, and Production Facilities to ensure good mechanical condition, inspect at regular intervals and maintain in good mechanical condition per Rule 608.e.

Date: 02/16/2024

Response: CA COMPLETED

Date of Completion: 02/14/2024

Operator
Comment: Complied with Rule 608.e.

COGCC Decision: _____

COGCC
Representative: _____

OPERATOR COMMENT AND SUBMITTAL

Comment: Complied with Rules 606 and 608.e.

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: 2/27/2024 4:11:13 PM

ATTACHMENT LIST

View Attachments in Imaged Documents on COGCC website (<http://ogccweblink.state.co.us/>) - Search by Document Number.

Document Number	Description
403701218	Location Photo
403701219	Location Photo
403701220	Location Photo
403701221	Location Photo

Total Attach: 4 Files