

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:
403782936

Date Received:
05/07/2024

FIR RESOLUTION FORM

Overall Status:

CA Summary:

3 of 3 CAs from the FIR responded to on this Form

3 CA Completed
0 Factual Review Request

OPERATOR INFORMATION

ECMC 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

Ahmadian, Alexander

alexander.ahmadian@state.co.us

rbucogccinspectionreports@chevron.onmicrosoft.com

ECMC INSPECTION SUMMARY:

FIR Document Number: 714200966

Inspection Date: 04/23/2024

FIR Submit Date: 04/24/2024

FIR Status: _____

Inspected Operator Information:

Company Name: CRESTONE PEAK RESOURCES OPERATING LLC

Company Number: 10633

Address: 555 17TH STREET SUITE 3700

City: DENVER State: CO Zip: 80202

LOCATION - Location ID: 336608

Location Name: REI Number: 25-10 County: _____

Qtrqtr: SWS Sec: 10 Twp: 3N Range: 65W Meridian: 6
W

Latitude: 40.233680 Longitude: -104.657390

FACILITY - API Number: 05-123-00 Facility ID: 336608

Facility Name: REI Number: 25-10

Qtrqtr: SWS Sec: 10 Twp: 3N Range: 65W Meridian: 6
W

Latitude: 40.233680 Longitude: -104.657390

CORRECTIVE ACTIONS:

1 CA# 194656

Corrective Action: Comply with Rule 608.f.

Date: 05/07/2024

Response: CA COMPLETED

Date of Completion: 05/07/2024

Operator
Comment:

Complied with Rule 608.f.

ECMC Decision: _____

ECMC Representative: _____

2 CA# 194657

Corrective Action: Comply with Rule 606.

Date: 05/07/2024

Response: CA COMPLETED

Date of Completion: 05/07/2024

Operator Comment:

Complied with Rule 606.

ECMC Decision: _____

ECMC Representative: _____

3 CA# 194658

Corrective Action: Comply with Rule 606.

Date: 05/07/2024

Response: CA COMPLETED

Date of Completion: 05/07/2024

Operator Comment:

Complied with Rule 606.

ECMC Decision: _____

ECMC Representative: _____

OPERATOR COMMENT AND SUBMITTAL

Comment:

Completed all corrective actions.

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

Print Name: Jeff White

Signed: _____

Title: HSE

Date: 5/7/2024 9:36:28 PM

ATTACHMENT LIST

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

<u>Document Number</u>	<u>Description</u>
403782937	photos

Total Attach: 1 Files