



## CERTIFICATE OF CLEARANCE

This form is the Certificate of Clearance to transport product from a well.

The Operator will submit a Form 10 within 30 days of the initial sale of oil or gas from a new well.

The Operator will submit a Form 10 within 30 days of a change of the transporter/gatherer for a well.

It is the Operator's responsibility to provide a copy of the approved Form 10 to the Transporter and/or Gatherer for each well listed.

Receive Date:

12/13/2023

ECMC Operator Number: 100322 Contact Person: Randy Thweatt  
Company Name: NOBLE ENERGY INC Phone: (303) 228-4000  
Address: 1099 18TH STREET SUITE 1500 Email: DenverRegulatory@chevron.onmicrosoft.com  
City: DENVER State: CO Zip: 80202

☒ New Well Certificate of Clearance☐ Add/Change Transporter or Gatherer

## Transporter or Gatherer

<input checked="" type="checkbox"/> Add	<input type="checkbox"/> Delete	Product:	<input type="checkbox"/> Oil	<input checked="" type="checkbox"/> Gas
ECMC Transporter No: 100322 Suffix: _____				
Trans./Gatherer Name: NOBLE ENERGY INC				
Address: 2001 16TH STREET SUITE 900		City: DENVER	State: CO	Zip: 80202
Phone: ( )		Email Contact: _____		

<input checked="" type="checkbox"/> Add	<input type="checkbox"/> Delete	Product:	<input checked="" type="checkbox"/> Oil	<input type="checkbox"/> Gas
ECMC Transporter No: 100322 Suffix: _____				
Trans./Gatherer Name: NOBLE ENERGY INC				
Address: 2001 16TH STREET SUITE 900		City: DENVER	State: CO	Zip: 80202
Phone: ( )		Email Contact: _____		

<input checked="" type="checkbox"/> Add	<input type="checkbox"/> Delete	Product:	<input checked="" type="checkbox"/> Oil	<input type="checkbox"/> Gas
ECMC Transporter No: 10637 Suffix: A				
Trans./Gatherer Name: IOWA TANKLINES INC				
Address: 9700 EMPORIA ST		City: HENDERSON	State: CO	Zip: 80640
Phone: ( )		Email Contact: _____		

<input checked="" type="checkbox"/> Add	<input type="checkbox"/> Delete	Product:	<input checked="" type="checkbox"/> Oil	<input type="checkbox"/> Gas
ECMC Transporter No: 10554 Suffix: A				
Trans./Gatherer Name: GIBSON ENERGY LLC				
Address: 216 16TH STREET STE 1600		City: DENVER	State: CO	Zip: 80202
Phone: ( )		Email Contact: _____		

Operator Comments:

I hereby certify that the statements made in this form are, to the best of my knowledge, true, correct and complete.  
The transporter(s)/gatherer(s) is (are) authorized to transport the oil and/or gas produced from the listed well(s) and this authorization will be valid until further notice to the transporter named herein or until revoked by the Colorado Energy & Carbon Management Commission.

**SUBMITTED BY:**

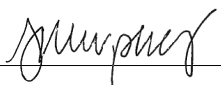
Signed: \_\_\_\_\_

Title: Regulatory Analyst II

Print Name: Kim Bauer

Email: kimberlybauer@chevron.com

Date: 12/13/2023

**ECMC Approved:** 

**Title:** Director of COGCC

**Date:** 12/02/2024



CERTIFICATE OF CLEARANCE

ECMC Operator Number: 100322  
Name of Operator: NOBLE ENERGY INC

Approved Transporters and/or Gatherers for New Wells Listed Below:

#	API	Date of First Sales:		Well		Location (QQ/S/T/R)	Transporter / Gatherer
		Oil	Gas	Name	Number		
1	123-49276	11/16/2023	11/16/2023	BOOTH STATE	CC30-715	NWNE/31/4N/63W	10554
							10637
							100322
2	123-49272	11/16/2023	11/16/2023	BOOTH STATE	CC30-725	NWNE/31/4N/63W	10554
							10637
							100322
3	123-49277	11/16/2023	11/16/2023	BOOTH STATE	CC30-734	NWNE/31/4N/63W	10554
							10637
							100322
4	123-49279	11/16/2023	11/16/2023	BOOTH STATE	CC30-745	NWNE/31/4N/63W	10554
							10637
							100322

**ATTACHMENT LIST**

**Att Doc Num**

**Name**

403599661

FORM 10 NEW WELL CERT. OF CLEARANCE SUBMITTED

Total Attach: 1 Files

## General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Permit	Permit review complete - Passed Task	12/02/2024
Total: 1 comment(s)		