

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:  
404305800

Date Received:  
08/05/2025

**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**

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                                             |
|------------------|-------|---------------------------------------------------|
| Anderson, Laurel |       | laurel.anderson@state.co.us                       |
| Graber, Nikki    |       | nikki.graber@state.co.us                          |
| .                |       | rbucogccinspectionreports@chevron.onmicrosoft.com |

**ECMC INSPECTION SUMMARY:**

FIR Document Number: 718200051

Inspection Date: 06/12/2025

FIR Submit Date: 06/30/2025

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

**Inspected Operator Information:**

Company Name: NOBLE ENERGY INC

Company Number: 100322

Address: 1099 18TH STREET SUITE 1500

City: DENVER State: CO Zip: 80202

**LOCATION** - Location ID: \_\_\_\_\_

Location Name: \_\_\_\_\_ Number: \_\_\_\_\_ County: \_\_\_\_\_

Qtrqtr: SWSE Sec: 19 Twp: 3N Range: 64W Meridian: 6

Latitude: 40.205264 Longitude: -104.591852

**FACILITY** - API Number: 05-123-00 Facility ID: 489269

Facility Name: LDS White D #19-15 Number: \_\_\_\_\_

Qtrqtr: SWSE Sec: 19 Twp: 3N Range: 64W Meridian: 6

Latitude: 40.205264 Longitude: -104.591852

**CORRECTIVE ACTIONS:**

1 CA# 205837

Corrective Action: Operator shall submit delinquent form for this project.

Date: 07/14/2025

Response: CA COMPLETED

Date of Completion: 08/01/2025

Operator Comment: Form 19 Doc# 404192109 was received by the ECMC on 8-1-2025.

ECMC Decision: \_\_\_\_\_

ECMC  
Representative:

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**OPERATOR COMMENT AND SUBMITTAL**

Comment: Form 19 Doc# 404192109 was received by the ECMC on 8-1-2025.

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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: 8/5/2025 12:22:11 PM

**ATTACHMENT LIST**

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

| <b>Document Number</b> | <b>Description</b>       |
|------------------------|--------------------------|
| 404305800              | FIR RESOLUTION SUBMITTED |

Total Attach: 1 Files