

State of Colorado Energy & Carbon Management Commission



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Document Number:
404428581

Date Received:
11/08/2025

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

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
.		rbucogccinspectionreports@chevron.com

ECMC INSPECTION SUMMARY:

FIR Document Number: 718800564
Inspection Date: 07/08/2025 FIR Submit Date: 07/28/2025 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: 309822

Location Name: MCWILLIAMS D-63N64W Number: 30SENE County: _____
Qtrqtr: SENE Sec: 30 Twp: 3N Range: 64W Meridian: 6
Latitude: 40.196439 Longitude: -104.585105

FACILITY - API Number: 05-123- -00 Facility ID: 309822

Facility Name: MCWILLIAMS D-63N64W Number: 30SENE
Qtrqtr: SENE Sec: 30 Twp: 3N Range: 64W Meridian: 6
Latitude: 40.196439 Longitude: -104.585105

CORRECTIVE ACTIONS:

1 CA# 206471

Corrective Action: Remove fencing or ensure fencing is in proper working condition. Date: _____

Response: CA COMPLETED Date of Completion: 10/30/2025

Operator Comment: Repaired fence and weeds on 10/30/2025.

ECMC Decision: _____

ECMC
Representative:

2 CA# 206472

Corrective Action: Comply with Rule 1004 to perform additional reclamation activities at the location and along the access road and perform weed management.

Date: _____

Response: CA COMPLETED

Date of Completion: 10/30/2025

Operator
Comment:

Seeded and fertilized location and access road on 10/30/2025.

ECMC Decision: _____

ECMC
Representative:

OPERATOR COMMENT AND SUBMITTAL

Comment: This site is in Chevron's scheduled inspecting, maintenance and monitoring program.

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: 11/8/2025 12:25:43 AM

ATTACHMENT LIST

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

Document Number **Description**

<u>Document Number</u>	<u>Description</u>

Total Attach: 0 Files