

State of Colorado
Energy & Carbon Management Commission



Document Number:
404492787

1120 Lincoln Street, Suite 801, Denver, Colorado 80203
Phone: (303) 894-2100 Fax: (303) 894-2109

Date Received:
01/03/2026

FIR RESOLUTION FORM

Overall Status:

CA Summary:
2 of 3 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
Jeff White		jeffery.white@chevron.com
. Inspections		rbucogccinspectionreports@chevron.onmicrosoft.com

ECMC INSPECTION SUMMARY:

FIR Document Number: 718000053
Inspection Date: 12/02/2025 FIR Submit Date: 12/03/2025 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: 423538

Location Name: Harper USX Number: EE27-07D Multi County:
Qtrqr: SENE Sec: 27 Twp: 7N Range: 65W Meridian: 6
Latitude: 40.546730 Longitude: -104.640950

FACILITY - API Number: 05-123-00 Facility ID: 423538

Facility Name: Harper USX Number: EE27-07D Multi
Qtrqr: SENE Sec: 27 Twp: 7N Range: 65W Meridian: 6
Latitude: 40.546730 Longitude: -104.640950

CORRECTIVE ACTIONS:

1 CA# 209725

Corrective Action: Repair liner and inspect liner for integrity to maintain compliance with Rules 603.o. and 608.f. Date: 01/03/2026

Response: CA COMPLETED Date of Completion: 01/03/2026

Operator Comment: Complied with Rule 603.o. and 608.f.

ECMC Decision: _____

ECMC
Representative:

2 CA# 209726

Corrective Action: Inspect produced water vessels and ensure operations are maintained to prevent Spills, pursuant to Rule 608.f.

Date: 01/03/2026

Response: CA COMPLETED

Date of Completion: 01/03/2026

Operator
Comment:

Complied with Rule 608.f.

ECMC Decision: _____

ECMC
Representative:

OPERATOR COMMENT AND SUBMITTAL

Comment: 2 of 3 Corrective Actions have been completed. See photo. Currently working on Supplemental Form 27 that was denied.

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: 1/3/2026 11:31:13 AM

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>
------------------------	--------------------

404492788	photo
-----------	-------

Total Attach: 1 Files