

State of Colorado Energy & Carbon Management Commission



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Phone: (303) 894-2100 Fax: (303) 894-2109

Document Number:
404598943

Date Received:
03/28/2026

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: <u>100322</u>	Contact Name and Telephone:
Name of Operator: <u>NOBLE ENERGY INC</u>	Name: _____
Address: <u>1099 18TH STREET SUITE 1500</u>	Phone: () _____ Fax: () _____
City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80202</u>	Email: _____

Additional Operator Contact:

Contact Name	Phone	Email
.		NBL_DJBU_Inspections@NBLENERGY.COM
.		rbucogccinspectionreports@chevron.onmicrosoft.com

ECMC INSPECTION SUMMARY:

FIR Document Number: 717900388
 Inspection Date: 03/20/2026 FIR Submit Date: 03/26/2026 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: 492714

Location Name: Clement Facility TB Location Number: 492714 County: _____
 Qtrqtr: SWSE Sec: 11 Twp: 4N Range: 66W Meridian: 6
 Latitude: 40.319360 Longitude: -104.740540

FACILITY - API Number: 05-123-00 Facility ID: 492714

Facility Name: Clement Facility TB Location Number: 492714
 Qtrqtr: SWSE Sec: 11 Twp: 4N Range: 66W Meridian: 6
 Latitude: 40.319360 Longitude: -104.740540

CORRECTIVE ACTIONS:

1 CA# 211892

Corrective Action: Comply with Rule 603.o. Date: 04/09/2026

Response: CA COMPLETED Date of Completion: 03/27/2026

Operator Comment: Complied with Rule 603.o.

ECMC Decision: _____

ECMC
Representative:

2 CA# 211893

Corrective Action: Install BMPs in accordance with 1002.f.(2) to prevent runon and runoff.

Date: 04/09/2026

Response: CA COMPLETED

Date of Completion: 03/27/2026

Operator
Comment: Complied with Rule 1002.f.(2)

ECMC Decision:

ECMC
Representative:

OPERATOR COMMENT AND SUBMITTAL

Comment: See photos. The last 2 wells into the facility have Form 6 intent to abandon approvals and the associated flowlines have out of service locks and tags.

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: 3/28/2026 10:57:31 AM

ATTACHMENT LIST

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

Document Number **Description**

404598944	photos
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Total Attach: 1 Files