

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:
404598949

Date Received:
03/28/2026

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
.		rbucogccinspectionreports@chevron.com

ECMC INSPECTION SUMMARY:

FIR Document Number: 718800388

Inspection Date: 05/28/2025

FIR Submit Date: 06/11/2025

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: 323334

Location Name: KAMMERZELL-64N66W Number: 4NESW County: _____

Qtrqtr: NESW Sec: 4 Twp: 4N Range: 66W Meridian: 6

Latitude: 40.339350 Longitude: -104.786260

FACILITY - API Number: 05-123- -00 Facility ID: 323334

Facility Name: KAMMERZELL-64N66W Number: 4NESW

Qtrqtr: NESW Sec: 4 Twp: 4N Range: 66W Meridian: 6

Latitude: 40.339350 Longitude: -104.786260

CORRECTIVE ACTIONS:

1 CA# 205808

Corrective Action: Comply with Rule 1004 to reclaim the access road, perform additional reclamation activities, and manage weeds at the location.

Date: _____

Response: CA COMPLETED

Date of Completion: 03/28/2026

Operator Comment: Complied with Rule 1004. The location and portions of the former access road were mowed location on 6/30/2025 and sprayed on 7/22/2025. Portions of the existing roads are being used by the landowner and are not associated with oil and gas.

ECMC Decision: _____

ECMC
Representative:

OPERATOR COMMENT AND SUBMITTAL

Comment: The location and portions of the access road that have been seeded will be monitored and maintained to continue compliance with Rule 1004.

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 11:34:40 AM

ATTACHMENT LIST

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

Document Number **Description**

404598949	FIR RESOLUTION SUBMITTED
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Total Attach: 1 Files