

State of Colorado  
Oil and Gas Conservation Commission

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



Document Number:

401191811

Date Received:

01/23/2017

FIR RESOLUTION FORM

CA Summary:

1 of 1 CAs from the FIR responded to on this Form

0 CA Completed  
1 Factual Review Request

OPERATOR INFORMATION

OGCC Operator Number: 10071  
Name of Operator: BARRETT CORPORATION\* BILL  
Address: 1099 18TH ST STE 2300  
City: DENVER State: CO Zip: 80202

Contact Name and Telephone:  
Name:  
Phone: ( ) Fax: ( )  
Email:

Additional Operator Contact:

Contact Name	Phone	Email
Arthur, Denise		denise.arthur@state.co.us
		COGCC_FIR@billbarrettcorp.com

COGCC INSPECTION SUMMARY:

FIR Document Number: 682401717  
Inspection Date: 01/20/2017 FIR Submit Date: 01/20/2017 FIR Status:

Inspected Operator Information:

Company Name: BARRETT CORPORATION\* BILL Company Number: 10071  
Address: 1099 18TH ST STE 2300  
City: DENVER State: CO Zip: 80202

LOCATION - Location ID: 448780

Location Name: Will Trust Number: 6-62-10\_11 CW2 County:  
Qtrqr: SWN Sec: 10 Twp: 6N Range: 62W Meridian: 6  
Latitude: 40.503603 Longitude: -104.316958

FACILITY - API Number: 05-123-00 Facility ID: 448780

Facility Name: Will Trust Number: 6-62-10\_11 CW2  
Qtrqr: SWN Sec: 10 Twp: 6N Range: 62W Meridian: 6  
Latitude: 40.503603 Longitude: -104.316958

CORRECTIVE ACTIONS:

1  CA# 63072

Corrective Action: Install sufficient BMP(s) in accordance with good engineering practices per Rule 1002.f. by corrective action date of January 22, 2017.

Date: 01/22/2017

Response: FACTUAL REVIEW REQUEST

Basis for Review: CA dates are not per the guidelines

Operator Comment: Per Chris Binchus via an email on 1/21/17, the corrective action date should have been 1/23/17. The work was completed on 1/23/17

COGCC Decision: Approved pending re-inspection

COGCC Representative:

COGCC Supervisor: Operator said conducted the work on the corrective action date per the inspector e-mail. Supervisor approves of the corrective action extension to 1/23/2017. Inspector will reinspect location.

OPERATOR COMMENT AND SUBMITTAL

Comment:

I hereby certify that the statements made in this form are, to the best of my knowledge, true, correct, and complete.

Print Name: Tracey Fallang

Signed: \_\_\_\_\_

Title: Regulatory Manager

Date: 1/23/2017 5:01:16 PM

**ATTACHMENT LIST**

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

**Document Number**      **Description**

401191811	FIR RESOLUTION SUBMITTED
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Total Attach: 1 Files