

State of Colorado
Oil and Gas Conservation Commission

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Document Number:
401259154
Date Received:
04/13/2017

FIR RESOLUTION FORM

Overall Status: FRQ

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: 10433
Name of Operator: LARAMIE ENERGY LLC
Address: 1401 SEVENTEENTH STREET #1400
City: DENVER State: CO Zip: 80202

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

Additional Operator Contact:

Contact Name	Phone	Email
<u>Joan Proulx</u>	<u>970-263-3641</u>	<u>jproulx@laramie-energy.com</u>

COGCC INSPECTION SUMMARY:

FIR Document Number: 674703821
Inspection Date: 04/12/2017 FIR Submit Date: 04/12/2017 FIR Status: _____

Inspected Operator Information:

Company Name: LARAMIE ENERGY LLC Company Number: 10433
Address: 1401 SEVENTEENTH STREET #1400
City: DENVER State: CO Zip: 80202

LOCATION - Location ID: 335057

Location Name: LOGAN TRAIL FED.-67S97W Number: 28NESE County: _____
Qtrqtr: NESE Sec: 28 Twp: 7S Range: 97W Meridian: 6
Latitude: 39.414199 Longitude: -108.218459

FACILITY - API Number: 05-045-00 Facility ID: 335057

Facility Name: LOGAN TRAIL FED.-67S97W Number: 28NESE
Qtrqtr: NESE Sec: 28 Twp: 7S Range: 97W Meridian: 6
Latitude: 39.414199 Longitude: -108.218459

CORRECTIVE ACTIONS:

1 CA# 70949

Corrective Action: Install sign to comply with Rule 210.a. Date: 04/20/2017

Response: FACTUAL REVIEW REQUEST

Basis for Review: Corrective action dates are not attainable

Operator Comment: The Logan Trail Federal 28-11 well is going to be plugged and abandoned in the 2nd or 3rd quarter of this year. A Form 6, Intent to Abandon, will be submitted to the COGCC before the end of April. The Logan Trail Federal 28-10 well on the same pad is also going to be plugged and abandoned at the same time in order to reduce rig mob costs and related mob traffic. Laramie Energy requests that the corrective action of installing signs on these two wells be deleted/dismissed.

COGCC Decision: _____

COGCC
Representative:

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: Joan Proulx

Signed: _____

Title: Regulatory Analyst

Date: 4/13/2017 3:47:26 PM

ATTACHMENT LIST

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

Document Number **Description**

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

Total Attach: 0 Files