

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:
401296871
Date Received:
05/31/2017

FIR RESOLUTION FORM

CA Summary:

1 of 3 CAs from the FIR responded to on this Form

1 CA Completed
0 Factual Review Request

OPERATOR INFORMATION

OGCC Operator Number: 100185

Name of Operator: ENCANA OIL & GAS (USA) INC

Address: 370 17TH ST STE 1700

City: DENVER State: CO Zip: 80202-5632

Contact Name and Telephone:

Name: _____

Phone: () Fax: ()

Email: _____

Additional Operator Contact:

Contact Name

Phone

Email

Jason Eckman

970-285-2656

jason.eckman@encana.com

COGCC INSPECTION SUMMARY:

FIR Document Number: 680101771

Inspection Date: 05/22/2017

FIR Submit Date: 05/26/2017

FIR Status: _____

Inspected Operator Information:

Company Name: ENCANA OIL & GAS (USA) INC

Company Number: 100185

Address: 370 17TH ST STE 1700

City: DENVER State: CO Zip: 80202-5632

LOCATION - Location ID: 334398

Location Name: ROWE-68S92W Number: 11SWNE County: GARFIELD

Qtrqr: SWNE Sec: 11 Twp: 8S Range: 92W Meridian: 6

Latitude: 39.376044 Longitude: -107.631004

FACILITY - API Number: 05-045-00 Facility ID: 269369

Facility Name: ROWE Number: 11-10A (G11SE)

Qtrqr: SWNE Sec: 11 Twp: 8S Range: 92W Meridian: 6

Latitude: 39.376044 Longitude: -107.631004

CORRECTIVE ACTIONS:

1 CA# 78023

Corrective Action: All Risers/ Flowlines/ Pipelines must abide by the Phase I of the May 2, 2017 Flowline NTO. Respond when corrective action is complete with date completed and photos attached to an FIRR response to CA. Make sure to identify both endpoints of all Risers/ Flowlines/ Pipelines.

Date: 05/31/2017

Response: CA COMPLETED

Date of Completion: 05/30/2017

Operator
Comment:

The pipe identified in the inspection is an electrical conduit owned by Holy Cross Energy and not part of the COGCC NTO.

COGCC Decision: **Not Approved**

COGCC Representative: All Risers/ Flowlines/ Pipelines, REGARDLESS of Ownership, must abide by the phase II of the May 2, 2017 Flowline NTO.

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: Jason Eckman

Signed: _____

Title: Sr. Regulatory Analyst

Date: 5/31/2017 3:37:02 PM

ATTACHMENT LIST

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

<u>Document Number</u>	<u>Description</u>
401296871	FIR RESOLUTION SUBMITTED

Total Attach: 1 Files