

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:

401332821

Date Received:

07/05/2017

FIR RESOLUTION FORM

CA Summary:

2 of 2 CAs from the FIR responded to on this Form

2 CA Completed
0 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

JERIN YOUNG

Phone

(720)402-7724

Email

Jyoung@billbarrettcorp.com

COGCC INSPECTION SUMMARY:

FIR Document Number: 685503167

Inspection Date: 06/27/2017

FIR Submit Date: 06/27/2017

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: 319428

Location Name: CARLA-61N63W Number: 20SWSW County: WELD

Qtrqr: SWS Sec: 20 Twp: 1N Range: 63W Meridian: 6
W

Latitude: 40.031633 Longitude: -104.467970

FACILITY - API Number: 05-123-00 Facility ID: 243454

Facility Name: CARLA Number: 1

Qtrqr: SWS Sec: 20 Twp: 1N Range: 63W Meridian: 6
W

Latitude: 40.031633 Longitude: -104.467970

CORRECTIVE ACTIONS:

1 ☒ CA# 83892

Corrective Action: Immediately to stop and clean up 24 hours to remove free fluids. 30-days to remove stained soil.

Date: 07/27/2017

Response: CA COMPLETED

Date of Completion: 06/28/2017

Operator
Comment:

Contaminated soil has been removed and dump line fixed 6/28/2017

COGCC Decision: Approved

COGCC
Representative:

2  CA# 83893

Corrective Action: Comply with Rule 603.f using the Rule 603.f guidance document for further details.

Date: 07/07/2017

Response: CA COMPLETED

Date of Completion: 06/28/2017

Operator
Comment: Weeds were sprayed on 6/28/2017.

COGCC Decision: Approved

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: Matt Barber

Signed: _____

Title: Sr. Permit Analyst

Date: 7/5/2017 4:35:30 PM

ATTACHMENT LIST

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

Document Number **Description**

401332821	FIR RESOLUTION SUBMITTED
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Total Attach: 1 Files