

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:

401356183

Date Received:

07/27/2017

FIR RESOLUTION FORM

Overall Status: CAC

CA Summary:

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

2 CA Completed
0 Factual Review Request

OPERATOR INFORMATION

OGCC Operator Number: 10608

Name of Operator: BNN WESTERN LLC

Address: 370 VAN GORDON STREET

City: LAKEWOOD State: CO Zip: 80228

Contact Name and Telephone:

Name: _____

Phone: () _____ Fax: () _____

Email: _____

Additional Operator Contact:

Contact Name

Phone

Email

Gopsill, Eric

eric.gopsill@bnn-energy.com

Leonard, Mike

mike.leonard@state.co.us

COGCC INSPECTION SUMMARY:

FIR Document Number: 684903877

Inspection Date: 06/27/2017

FIR Submit Date: 06/27/2017

FIR Status: _____

Inspected Operator Information:

Company Name: BNN WESTERN LLC

Company Number: 10608

Address: 370 VAN GORDON STREET

City: LAKEWOOD State: CO Zip: 80228

LOCATION - Location ID: 420505

Location Name: Wild Horse Number: 16-13H County: _____

Qtrqr: NWS Sec: 16 Twp: 9N Range: 59W Meridian: 6
W

Latitude: 40.748570 Longitude: -103.990200

FACILITY - API Number: 05-123- -00 Facility ID: 420505

Facility Name: Wild Horse Number: 16-13H

Qtrqr: NWS Sec: 16 Twp: 9N Range: 59W Meridian: 6
W

Latitude: 40.748570 Longitude: -103.990200

CORRECTIVE ACTIIONS:

2 CA# 83861

Corrective Action: Install sign to comply with Rule 210.b.

Date: 07/27/2017

Response: CA COMPLETED

Date of Completion: 07/17/2017

Operator Comment: A sign has been installed at the well head with the current operators emergency contact information. See the attached picture.

COGCC Decision: _____

COGCC
Representative:

3 CA# 83862

Corrective Action: Install sign to comply with Rule 210.b.

Date: 07/27/2017

Response: CA COMPLETED

Date of Completion: 07/17/2017

Operator
Comment:

A sign has been installed at the well head with the current operators contact information. See attached picture.

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: Eric Gopsill

Signed: _____

Title: Director: Water Solutions

Date: 7/27/2017 11:30:15 AM

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>
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401356196	Sign at Wildhorse well head
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Total Attach: 1 Files