

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:

401410999

Date Received:

09/22/2017

FIR RESOLUTION FORM

Overall Status: CAC

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: 76840
Name of Operator: SCHNEIDER ENERGY SERVICES INC
Address: P O BOX 889
City: FORT MORGAN State: CO Zip: 80701

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

Additional Operator Contact:

Contact Name Phone Email
Schneider, Jeff 970-867-9437/(214) 244-3819 jeff@schneiderenergy.com

COGCC INSPECTION SUMMARY:

FIR Document Number: 685503719
Inspection Date: 09/06/2017 FIR Submit Date: 09/06/2017 FIR Status:

Inspected Operator Information:

Company Name: SCHNEIDER ENERGY SERVICES INC Company Number: 76840
Address: P O BOX 889
City: FORT MORGAN State: CO Zip: 80701

LOCATION - Location ID: 319639

Location Name: COORDES-61S57W Number: 7SWNW County:
Qtrqr: SWN Sec: 7 Twp: 1S Range: 57W Meridian: 6
W
Latitude: 39.981844 Longitude: -103.816258

FACILITY - API Number: 05-001- -00 Facility ID: 319639

Facility Name: COORDES-61S57W Number: 7SWNW
Qtrqr: SWN Sec: 7 Twp: 1S Range: 57W Meridian: 6
W
Latitude: 39.981844 Longitude: -103.816258

CORRECTIVE ACTIIONS:

1 CA# 98098

Corrective Action: Control and contain spills/releases and clean up per Rule 906.a. Contact COGCC EPS staff. Date: 09/22/2017

Response: CA COMPLETED Date of Completion: 09/21/2017

Operator Comment: Cleaned wellhead and soiled dirt around wellhead

COGCC Decision: _____

COGCC Representative: _____

2 CA# 98099

Corrective Action: Comply with Rule 603.f .

Date: 10/06/2017

Response: CA COMPLETED

Date of Completion: 09/21/2017

Operator Comment: Removed unused pipe and belt guard at wellhead

COGCC Decision: _____

COGCC Representative: _____

OPERATOR COMMENT AND SUBMITTAL

Comment: All worked completed by 9/21/17

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

Print Name: Jeff Schneider

Signed: _____

Title: President

Date: 9/22/2017 9:42:35 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>
401411029	Tubing and belt guard removed
401411039	Cleaned wellhead and soil around wellhead

Total Attach: 2 Files