

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:
401450610
Date Received:
11/06/2017

FIR RESOLUTION FORM

Overall Status: CAC

CA Summary:

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

3 CA Completed
0 Factual Review Request

OPERATOR INFORMATION

OGCC Operator Number: 69175

Name of Operator: PDC ENERGY INC

Address: 1775 SHERMAN STREET - STE 3000

City: DENVER State: CO Zip: 80203

Contact Name and Telephone:

Name: _____

Phone: () _____ Fax: () _____

Email: _____

Additional Operator Contact:

Contact Name

Phone

Email

Alfred Alvarez

alfred.alvarez@pdce.com

Cynthia Stowell

cynthia.stowell@pdce.com

COGCC INSPECTION SUMMARY:

FIR Document Number: 680704842

Inspection Date: 10/13/2017

FIR Submit Date: 10/13/2017

FIR Status: _____

Inspected Operator Information:

Company Name: PDC ENERGY INC

Company Number: 69175

Address: 1775 SHERMAN STREET - STE 3000

City: DENVER State: CO Zip: 80203

LOCATION - Location ID: 305444

Location Name: A. R.-64N67W Number: 18SESE County: WELD

Qtrqr: SESE Sec: 18 Twp: 4N Range: 67W Meridian: 6

Latitude: 40.308120 Longitude: -104.926170

FACILITY - API Number: 05-123-00 Facility ID: 277733

Facility Name: A. R. Number: 18-44

Qtrqr: SESE Sec: 18 Twp: 4N Range: 67W Meridian: 6

Latitude: 40.308120 Longitude: -104.926170

CORRECTIVE ACTIONS:

1 CA# 105123

Corrective Action: Comply with Rule 603.f .

Date: 10/31/2017

Response: CA COMPLETED

Date of Completion: 10/31/2017

Operator
Comment:

Weeds have been removed

COGCC Decision: _____

COGCC
Representative:

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2 CA# 105124

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

Date: 12/15/2017

Response: CA COMPLETED

Date of Completion: 11/06/2017

Operator
Comment: Sign Installed

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COGCC Decision: _____

COGCC
Representative:

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3 CA# 105125

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

Date: 12/15/2017

Response: CA COMPLETED

Date of Completion: 11/06/2017

Operator
Comment: New sign installed

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COGCC Decision: _____

COGCC
Representative:

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OPERATOR COMMENT AND SUBMITTAL

Comment: Corrective Action Completed

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

Print Name: Cynthia Stowell

Signed: _____

Title: EHS Professional

Date: 11/6/2017 8:42:51 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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Total Attach: 0 Files