

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:

401534595

Date Received:

02/02/2018

FIR RESOLUTION FORM

Overall Status: CAC

CA Summary:

4 of 4 CAs from the FIR responded to on this Form

4 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 | Phone | Email |
|--------------|--------------|----------------------------|
| Casey Lauer | 970-396-5960 | clauer@billbarrettcorp.com |

COGCC INSPECTION SUMMARY:

FIR Document Number: 682403211
Inspection Date: 01/12/2018 FIR Submit Date: 01/18/2018 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: 452695

Location Name: Anschutz-Williams Number: 5-61-27 CW2 County:
Qtrqtr: NWS Sec: 27 Twp: 5N Range: 61W Meridian: 6
Latitude: 40.371186 Longitude: -104.203572

FACILITY - API Number: 05-123-00 Facility ID: 452695

Facility Name: Anschutz-Williams Number: 5-61-27 CW2
Qtrqtr: NWS Sec: 27 Twp: 5N Range: 61W Meridian: 6
Latitude: 40.371186 Longitude: -104.203572

CORRECTIVE ACTIIONS:

1 CA# 114103

Corrective Action: Properly store or remove sawdust from location. Date: 01/22/2018

Response: CA COMPLETED Date of Completion: 01/19/2018

Operator Comment: Sawdust has been removed from locatin.

COGCC Decision: _____

COGCC
Representative:

2 CA# 114104

Corrective Action: Date: 01/22/2018

Response: CA COMPLETED Date of Completion: 01/19/2018

Operator Comment:

COGCC Decision: _____

COGCC
Representative:

3 CA# 114105

Corrective Action: Date: 01/22/2018

Response: CA COMPLETED Date of Completion: 01/19/2018

Operator Comment:

COGCC Decision: _____

COGCC
Representative:

4 CA# 114106

Corrective Action: Date: 02/01/2018

Response: CA COMPLETED Date of Completion: 01/31/2018

Operator Comment:

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: Matt Barber

Signed: _____

Title: Sr. Permit Analyst

Date: 2/2/2018 2:11:06 PM

ATTACHMENT LIST

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

| Document Number | Description |
|------------------------|--------------------|
| | |

Total Attach: 0 Files