

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:

401535739

Date Received:

02/05/2018

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

Ryan Hawkins

ryan.hawkins@pdce.com

Cynthia Stowell

cynthia.stowell@pdce.com

COGCC INSPECTION SUMMARY:

FIR Document Number: 684904761

Inspection Date: 12/12/2017

FIR Submit Date: 12/12/2017

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: 330519

Location Name: LOUSTALET-65N64W Number: 15NENE County: WELD

Qtrqtr: NENE Sec: 15 Twp: 5N Range: 64W Meridian: 6

Latitude: 40.404390 Longitude: -104.529560

FACILITY - API Number: 05-123- -00 Facility ID: 251433

Facility Name: LOUSTALET Number: 41-15

Qtrqtr: NENE Sec: 15 Twp: 5N Range: 64W Meridian: 6

Latitude: 40.404390 Longitude: -104.529560

CORRECTIVE ACTIONS:

1 CA# 113344

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

Date: 02/12/2018

Response: CA COMPLETED

Date of Completion: 02/05/2018

Operator  
Comment: complete

COGCC Decision: \_\_\_\_\_

COGCC  
Representative:

**2** CA# 113345

Corrective Action: Comply with Rule 603.f .

Date: 12/22/2017

Response: CA COMPLETED

Date of Completion: 12/21/2017

Operator  
Comment: complete

COGCC Decision: \_\_\_\_\_

COGCC  
Representative:

**3** CA# 113346

Corrective Action: Install or repair required BMPs per Rule 1002.f.

Date: 01/12/2018

Response: CA COMPLETED

Date of Completion: 01/12/2018

Operator  
Comment: complete

COGCC Decision: \_\_\_\_\_

COGCC  
Representative:

#### OPERATOR COMMENT AND SUBMITTAL

Comment: Corrective Actions completed

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: 2/5/2018 12:41:56 PM

### 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