

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:

401665020

Date Received:

06/06/2018

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: 900

Name of Operator: ALAMOSA DRILLING INC

Address: 8150 N. CENTRAL EXPY - STE 750

City: DALLAS State: TX Zip: 75205-1832

Contact Name and Telephone:

Name: _____

Phone: () _____ Fax: () _____

Email: _____

Additional Operator Contact:

Contact Name

Phone

Email

Todd Moore

214-244-3819

kiowagas@sbcglobal.net

COGCC INSPECTION SUMMARY:

FIR Document Number: 688800130

Inspection Date: 05/29/2018

FIR Submit Date: 05/31/2018

FIR Status: _____

Inspected Operator Information:

Company Name: ALAMOSA DRILLING INC

Company Number: 900

Address: 8150 N. CENTRAL EXPY - STE 750

City: DALLAS State: TX Zip: 75205-1832

LOCATION - Location ID: 320854

Location Name: CHAVEZ-N32N1E Number: 17NWNW County: ARCHULETA

Qtrqr: NWN Sec: 17 Twp: 32N Range: 1E Meridian: N
W

Latitude: 37.018267 Longitude: -106.875067

FACILITY - API Number: 05-007- -00 Facility ID: 205242

Facility Name: CHAVEZ Number: 1

Qtrqr: NWN Sec: 17 Twp: 32N Range: 1E Meridian: N
W

Latitude: 37.018267 Longitude: -106.875067

CORRECTIVE ACTIONS:

1 CA# 116596

Corrective Action: Control and contain spills/releases and clean up per Rule 906.a. Contact COGCC EPS staff. Corrective action date taken from previous inspection report.

Date: 05/18/2018

Response: CA COMPLETED

Date of Completion: 07/06/2018

Operator
Comment:

Corrective action will be completed by July 6, 2018.

COGCC Decision: _____

COGCC
Representative:

2 CA# 116597

Corrective Action: Control and contain spills/releases and clean up per Rule 906.a. Contact COGCC EPS staff. Corrective action date taken from previous inspection report.

Date: 05/18/2018

Response: CA COMPLETED

Date of Completion: 07/06/2018

Operator
Comment:

Corrective action will be completed by July 6, 2018.

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: Todd Moore

Signed: _____

Title: President

Date: 6/6/2018 1:34:30 PM

ATTACHMENT LIST

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

Document Number **Description**

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Total Attach: 0 Files