

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:

401768317

Date Received:

09/19/2018

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: 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
Whittington, Ellice		jeff@schneiderenergy.com kbothwell@schneiderenergy.com ellice.whittington@state.co.us

COGCC INSPECTION SUMMARY:

FIR Document Number: 682403917
Inspection Date: 08/24/2018 FIR Submit Date: 08/28/2018 FIR Status:

Inspected Operator Information:

Company Name: CONTINENTAL RESOURCES INC Company Number: 10347
Address: PO BOX 268870
City: OKLAHOMA CITY State: OK Zip: 73126

LOCATION - Location ID: 421003

Location Name: Newton Number: 1-4H County: WELD
Qtrqtr: LOT 1 Sec: 4 Twp: 9N Range: 61W Meridian: 6
Latitude: 40.783084 Longitude: -104.204003

FACILITY - API Number: 05-123-00 Facility ID: 421002

Facility Name: Newton Number: 1-4H
Qtrqtr: LOT 1 Sec: 4 Twp: 9N Range: 61W Meridian: 6
Latitude: 40.783084 Longitude: -104.204003

CORRECTIVE ACTIONS:

1 CA# 118260

Corrective Action: Contact the Engineering Integrity Group-Ellice Whittington or Mark Schlagenhauf- by 9/4/18. Date: 09/04/2018

Response: CA COMPLETED Date of Completion: 09/05/2018

Operator Comment: Spoke to Ellice Whittington on 9/5/18 and tagged out risers

COGCC Decision: _____

COGCC
Representative:

2 CA# 118261

Corrective Action: Date: 09/25/2018

Response: CA COMPLETED

Date of Completion: 09/03/2018

Operator
Comment:

COGCC Decision: _____

COGCC
Representative:

3 CA# 118262

Corrective Action: Date: 09/25/2018

Response: CA COMPLETED

Date of Completion: 09/07/2018

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: Jeff Schneider

Signed: _____

Title: President

Date: 9/19/2018 2:45:16 PM

ATTACHMENT LIST

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

Document Number **Description**

401768338	Photos of Newton 1-4H site.
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Total Attach: 1 Files