

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:

401844968

Date Received:

11/19/2018

FIR RESOLUTION FORM

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: 52530

Name of Operator: MAGPIE OPERATING, INC

Address: 2707 SOUTH COUNTY RD 11

City: LOVELAND State: CO Zip: 80537

Contact Name and Telephone:

Name: \_\_\_\_\_

Phone: ( ) \_\_\_\_\_ Fax: ( ) \_\_\_\_\_

Email: \_\_\_\_\_

Additional Operator Contact:

Contact Name	Phone	Email
<u>Warner, Ryan</u>	<u>970-669-6308</u>	<u>magpieoil@yahoo.com</u>

COGCC INSPECTION SUMMARY:

FIR Document Number: 674301032

Inspection Date: 11/14/2018

FIR Submit Date: 11/14/2018

FIR Status: \_\_\_\_\_

Inspected Operator Information:

Company Name: MAGPIE OPERATING, INC

Company Number: 52530

Address: 2707 SOUTH COUNTY RD 11

City: LOVELAND State: CO Zip: 80537

LOCATION - Location ID: 326807

Location Name: PETERSON-64N68W Number: 5SWNW County: \_\_\_\_\_

Qtrqr: SWN Sec: 5 Twp: 4N Range: 68W Meridian: 6  
W

Latitude: 40.343564 Longitude: -105.035109

FACILITY - API Number: 05-123- -00 Facility ID: 326807

Facility Name: PETERSON-64N68W Number: 5SWNW

Qtrqr: SWN Sec: 5 Twp: 4N Range: 68W Meridian: 6  
W

Latitude: 40.343564 Longitude: -105.035109

CORRECTIVE ACTIONS:

1  CA# 120422

Corrective Action: Comply with Rule 603.f .

Date: 11/30/2018

Response: CA COMPLETED

Date of Completion: 11/16/2018

Operator Comment: Weeds have been removed to comply with rule 603.f

COGCC Decision: Approved pending re-inspection

COGCC Representative:

[Empty text box for COGCC Representative]

2  CA# 120423

Corrective Action: Exposed Bradenhead valve to surface.

Date: 11/30/2018

Response: CA COMPLETED

Date of Completion: 11/16/2018

Operator Comment:

Braden head has been exposed to surface. Please see attached photos.

COGCC Decision: Approved pending re-inspection

COGCC Representative:

[Empty text box for COGCC Representative]

OPERATOR COMMENT AND SUBMITTAL

Comment:

[Empty text box for Operator Comment]

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

Print Name: Ryan Warner

Signed: \_\_\_\_\_

Title: Vice President

Date: 11/19/2018 12:52:01 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>
401844968	FIR RESOLUTION SUBMITTED
401844984	bradenhead exposed
401844991	weed control

Total Attach: 3 Files