

State of Colorado
Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203
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Document Number:
401879882
Date Received:
01/07/2019

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: 10112
Name of Operator: FOUNDATION ENERGY MANAGEMENT LLC
Address: 5057 KELLER SPRINGS RD STE 650
City: ADDISON State: TX Zip: 75001

Contact Name and Telephone:
Name:
Phone: () Fax: ()
Email:

Additional Operator Contact:

Contact Name Phone Email
Alyssa Beard 303-244-8114 regulatory@foundationenergy.com

COGCC INSPECTION SUMMARY:

FIR Document Number: 679701984
Inspection Date: 12/06/2018 FIR Submit Date: 12/06/2018 FIR Status:

Inspected Operator Information:

Company Name: FOUNDATION ENERGY MANAGEMENT LLC Company Number: 10112
Address: 5057 KELLER SPRINGS RD STE 650
City: ADDISON State: TX Zip: 75001

LOCATION - Location ID: 335611

Location Name: COLUMBINE SP FED-64S104W Number: 25NWNW County: RIO BLANCO
Qtrqtr: NWN Sec: 25 Twp: 4S Range: 104W Meridian: 6
Latitude: 39.686830 Longitude: -109.026770

FACILITY - API Number: 05-103-00 Facility ID: 230876

Facility Name: COLUMBINE SP FED Number: 13-25-4-104
Qtrqtr: NWN Sec: 25 Twp: 4S Range: 104W Meridian: 6
Latitude: 39.686830 Longitude: -109.026770

CORRECTIVE ACTION:

1 CA# 120814

Corrective Action: Install wildlife screen per Rule 605.b.(7). Date: 01/11/2019

Response: CA COMPLETED Date of Completion: 12/13/2018

Operator Comment: Installed bird cone on separator stack

COGCC Decision: _____

COGCC Representative: _____

2 CA# 120815

Corrective Action: Well must have a successful mechanical integrity test performed or plugged as directed by Rule 319 b (3)

Date: _____

Response: CA COMPLETED

Date of Completion: 01/07/2019

Operator Comment: Submitted for 5A

COGCC Decision: _____

COGCC Representative: _____

3 CA# 120816

Corrective Action: Well must have a successful mechanical integrity test performed or plugged as directed by Rule 319 b (3)

Date: _____

Response: CA COMPLETED

Date of Completion: 01/07/2019

Operator Comment: Submitted form 5A

COGCC Decision: _____

COGCC Representative: _____

OPERATOR COMMENT AND SUBMITTAL

Comment: Installed bird cone on separator stack

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

Print Name: Christina Foster

Signed: _____

Title: HSE Tech

Date: 1/7/2019 2:01:59 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>
401879893	Bird Cone

Total Attach: 1 Files