

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:

401916665

Date Received:

01/24/2019

FIR RESOLUTION FORM

Overall Status: CAC

CA Summary:

1 of 1 CAs from the FIR responded to on this Form

1 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

Tyranny Bergin

970-313-5547

EHSCOGCCInspections@pdce.com

COGCC INSPECTION SUMMARY:

FIR Document Number: 679300021

Inspection Date: 11/29/2018

FIR Submit Date: 12/04/2018

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: 306735

Location Name: VIEFHAUS-65N63W Number: 29NESE County: WELD

Qtrqtr: NESE Sec: 29 Twp: 5N Range: 63W Meridian: 6

Latitude: 40.368720 Longitude: -104.453440

FACILITY - API Number: 05-123-00 Facility ID: 290623

Facility Name: VIEFHAUS Number: 43-29U

Qtrqtr: NESE Sec: 29 Twp: 5N Range: 63W Meridian: 6

Latitude: 40.368720 Longitude: -104.453440

CORRECTIVE ACTIONS:

1 CA# 120764

Corrective Action: The Operator shall submit a Form 27 Site Investigation and Remediation Workplan for the removal of a buried/partially buried produced water vessel in accordance with Rule 905.b. The Form 27 Workplan may be submitted with the excavation and site assessment results, but should be submitted no later than 90 days from the Spill Report Date in order to resolve this release.

Date: 02/27/2019

Response: CA COMPLETED

Date of Completion: 01/02/2019

Operator  
Comment:

CA has been completed. Form 27 submitted and NFA granted on 01/02/2019.

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

COGCC  
Representative:

--

**OPERATOR COMMENT AND SUBMITTAL**

Comment: CA has been completed.

--

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

Print Name: Tyranny Bergin

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

Title: EHS Coordinator

Date: 1/24/2019 12:44:18 PM

**ATTACHMENT LIST**

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

<b><u>Document Number</u></b>	<b><u>Description</u></b>
-------------------------------	---------------------------

--	--

Total Attach: 0 Files