

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:

401987365

Date Received:

03/27/2019

FIR RESOLUTION FORM

Overall Status: CAC

CA Summary:

1 of 2 CAs from the FIR responded to on this Form

1 CA Completed

0 Factual Review Request

OPERATOR INFORMATION

OGCC Operator Number: 10412

Name of Operator: AUSCO PETROLEUM INC

Address: 113 N SANTA FE AVENUE

City: FLORENCE State: CO Zip: 81226

Contact Name and Telephone:

Name: _____

Phone: () _____ Fax: () _____

Email: _____

Additional Operator Contact:

Contact Name

Phone

Email

Costa, Ryan

ryan.costa@state.co.us

Harkins, Liz

303-233-2232/719-429-4513

Lharkins@austineexploration.com

Hart, Tim

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Kosola, Jason

jason.kosola@state.co.us

COGCC INSPECTION SUMMARY:

FIR Document Number: 693900044

Inspection Date: 02/28/2019

FIR Submit Date: 03/11/2019

FIR Status: _____

Inspected Operator Information:

Company Name: AUSCO PETROLEUM INC

Company Number: 10412

Address: 113 N SANTA FE AVENUE

City: FLORENCE State: CO Zip: 81226

LOCATION - Location ID: 429883

Location Name: Pathfinder Number: C 14-01 1 County: FREMONT

Qtrqr: SWS Sec: 1 Twp: 20S Range: 70W Meridian: 6
W

Latitude: 38.333410 Longitude: -105.179460

FACILITY - API Number: 05-043- -00 Facility ID: 429882

Facility Name: Amerigo Vespucci Number: 1

Qtrqr: SWS Sec: 1 Twp: 20S Range: 70W Meridian: 6
W

Latitude: 38.333410 Longitude: -105.179460

CORRECTIVE ACTIONS:

1 CA# 123106

Corrective Action: Control and contain spills/releases and clean up per Rule 906.a. Contact COGCC EPS staff, Jason Kasola (719) 574-8602 (office) or (719) 641-0291 (cell).

Date: 03/13/2019

Response: CA COMPLETED

Date of Completion: 03/27/2019

Operator Comment: Per Rule 906.a., de minimis volume of what appeared to be mud and salt crust were scraped/excavated from near the wellhead and near the frac tank to three inches below grade. Excavation/scraping occurred on 3/25/19 and material was removed on 3/27/19.

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: Chris Del Hierro

Signed: _____

Title: Agent

Date: 3/27/2019 11:00:15 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>
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Total Attach: 0 Files