

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:  
401992487  
Date Received:  
04/02/2019

FIR RESOLUTION FORM

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: 51130  
Name of Operator: LOCIN OIL CORPORATION  
Address: 2445 TECHNOLOGY FOREST BD #710  
City: THE WOODLANDS State: TX Zip: 77381  
Contact Name and Telephone:  
Name:  
Phone: ( ) Fax: ( )  
Email:

Additional Operator Contact:

Contact Name Phone Email  
Nicol, Mike 281-362-8600 x116 mnicol@nclnr.com

COGCC INSPECTION SUMMARY:

FIR Document Number: 679703067  
Inspection Date: 02/21/2019 FIR Submit Date: 02/21/2019 FIR Status:

Inspected Operator Information:

Company Name: LOCIN OIL CORPORATION Company Number: 51130  
Address: 2445 TECHNOLOGY FOREST BD #710  
City: THE WOODLANDS State: TX Zip: 77381

LOCATION - Location ID: 316091

Location Name: ROBERTS GOVERNMENT-63S102W Number: 4NENE County: RIO BLANCO  
Qtrqtr: NENE Sec: 4 Twp: 3S Range: 102W Meridian: 6  
Latitude: 39.821267 Longitude: -108.843133

FACILITY - API Number: 05-103-00 Facility ID: 232094

Facility Name: ROBERTS GOVERNMENT Number: 1-4-3-2  
Qtrqtr: NENE Sec: 4 Twp: 3S Range: 102W Meridian: 6  
Latitude: 39.821267 Longitude: -108.843133

CORRECTIVE ACTIIONS:

1  CA# 122646

Corrective Action: Submit an eForm 15 Pit Report to update COGCC records with current information to comply with rule 903.a. Date: 02/06/2019

Response: CA COMPLETED Date of Completion: 03/06/2019

Operator Comment: Pits have been approved by COGCC as Facilities #107455 and #107456. COGCC did not transfer these facilities from the prior operator when the associated well transfer was approved in 2000. From 10 was filed electronically on March 6, 2019 document #401957993 to transfer the facilities to Locin Oil Corporation.

COGCC Decision: Approved pending re-inspection

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: Michael Nicol

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

Title: Manager

Date: 4/2/2019 7:47:36 AM

**ATTACHMENT LIST**

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

<b>Document Number</b>	<b>Description</b>
401992487	FIR RESOLUTION SUBMITTED

Total Attach: 1 Files