

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:

401992517

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

Nicol, Michael

Phone

281-362-8600x116

Email

mnicol@locinoil.com

COGCC INSPECTION SUMMARY:

FIR Document Number: 679703165

Inspection Date: 02/28/2019

FIR Submit Date: 02/28/2019

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: 316010

Location Name: SOUTHWEST RANGELY FED-61S102W Number: 4NESW County: RIO BLANCO

Qtrqtr: NESW Sec: 4 Twp: 1S Range: 102W Meridian: 6

Latitude: 39.987900 Longitude: -108.850350

FACILITY - API Number: 05-103-00 Facility ID: 231911

Facility Name: SOUTHWEST RANGELY FED Number: 11-4-1-2

Qtrqtr: NESW Sec: 4 Twp: 1S Range: 102W Meridian: 6

Latitude: 39.987900 Longitude: -108.850350

CORRECTIVE ACTIONS:

1 ☒ CA# 122810

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

Date: 03/20/2019

Response: CA COMPLETED

Date of Completion: 03/06/2019

Operator  
Comment:

Pit has been approved by COGCC as Facility #101807. COGCC did not transfer this facility from the prior operator when the associated well transfer was approved in 2000. Form 10 was filed electronically on March 6, 2019 document #401957993 to transfer the facility 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 8:08:52 AM

**ATTACHMENT LIST**

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

**Document Number**      **Description**

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|-----------|--------------------------|
| 401992517 | FIR RESOLUTION SUBMITTED |
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Total Attach: 1 Files