

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:

402002586

Date Received:

04/10/2019

FIR RESOLUTION FORM

Overall Status: CAC

CA Summary:

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

2 CA Completed
0 Factual Review Request

OPERATOR INFORMATION

OGCC Operator Number: 10311

Name of Operator: SRC ENERGY INC

Address: 1675 BROADWAY SUITE 2600

City: DENVER State: CO Zip: 80202

Contact Name and Telephone:

Name: _____

Phone: () _____ Fax: () _____

Email: _____

Additional Operator Contact:

Contact Name

Phone

Email

+ cogccinspections@srcenergy.com

+ dnr_cogccengineering@state.co.us

Pesicka, Conor conor.pesicka@state.co.us

COGCC INSPECTION SUMMARY:

FIR Document Number: 696100475

Inspection Date: 03/12/2019

FIR Submit Date: 03/12/2019

FIR Status: _____

Inspected Operator Information:

Company Name: SRC ENERGY INC

Company Number: 10311

Address: 1675 BROADWAY SUITE 2600

City: DENVER State: CO Zip: 80202

LOCATION - Location ID: 323272

Location Name: MILNE-66N65W Number: 18NENE County: _____

Qtrqtr: NENE Sec: 18 Twp: 6N Range: 65W Meridian: 6

Latitude: 40.493564 Longitude: -104.699490

FACILITY - API Number: 05-123- -00 Facility ID: 323272

Facility Name: MILNE-66N65W Number: 18NENE

Qtrqtr: NENE Sec: 18 Twp: 6N Range: 65W Meridian: 6

Latitude: 40.493564 Longitude: -104.699490

CORRECTIVE ACTIONS:

1 CA# 123197

Corrective Action: Post Accurate capacity in Bbls. at produced H2O vault to comply with Rule 210.d.

Date: 05/13/2019

Response: CA COMPLETED

Date of Completion: 04/10/2019

Operator
Comment: Please see the attached photo

COGCC Decision: _____

COGCC
Representative: _____

2 CA# 123200

Corrective Action: Post Accurate Emergency contact number at well to comply with Rule 210.b.

Date: 04/11/2019

Response: CA COMPLETED

Date of Completion: 04/10/2019

Operator
Comment: Please see the attached photo

COGCC Decision: _____

COGCC
Representative: _____

OPERATOR COMMENT AND SUBMITTAL

Comment: Attn: Bret Evins

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

Print Name: Amy Hilim

Signed: _____

Title: Administrative Assistant

Date: 4/10/2019 9:35:47 AM

ATTACHMENT LIST

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

Document Number **Description**

402002588	Corrective Action Photos
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Total Attach: 1 Files