

State of Colorado
Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203
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Document Number:
402023629
Date Received:
04/26/2019

FIR RESOLUTION FORM

Overall Status: CAC

CA Summary:

9 of 9 CAs from the FIR responded to on this Form

9 CA Completed
0 Factual Review Request

OPERATOR INFORMATION

OGCC Operator Number: 10508
Name of Operator: SELECT ENERGY SERVICES LLC
Address: PO BOX 1715
City: GAINESVILLE State: TX Zip: 76241

Contact Name and Telephone:
Name:
Phone: () Fax: ()
Email:

Additional Operator Contact:

Contact Name	Phone	Email
Gomez, Jason		jason.gomez@state.co.us
Ries, Barb	970-284-7820	bries@selectenergyservices.com
Koehler, Bob		bob.koehler@state.co.us
R., Harvey	970-324-9342	hgreenwood@selectenergyservices.com

COGCC INSPECTION SUMMARY:

FIR Document Number: 688401721
Inspection Date: 03/27/2019 FIR Submit Date: 03/27/2019 FIR Status:

Inspected Operator Information:

Company Name: SELECT ENERGY SERVICES LLC Company Number: 10508
Address: PO BOX 1715
City: GAINESVILLE State: TX Zip: 76241

LOCATION - Location ID: 413438

Location Name: LSWD Number: 1 County:
Qtrqtr: NENW Sec: 18 Twp: 3N Range: 64W Meridian: 6
Latitude: 40.231120 Longitude: -104.594900

FACILITY - API Number: 05-123-00 Facility ID: 159372

Facility Name: LSWD #1 Number:
Qtrqtr: NENW Sec: 18 Twp: 3N Range: 64W Meridian: 6
Latitude: 40.231120 Longitude: -104.594900

CORRECTIVE ACTIONS:

1 CA# 123549

Corrective Action: Repair or install berms or other secondary containment devices per Rule 906.d.(1). Date: 04/27/2019

Response: CA COMPLETED Date of Completion: 04/11/2019

Repairs have been completed on acid tank with signage installed, bull plug installed, valve leak repaired. In

Operator Comment: process of removing acid, KCL tanks as we have changed our recycling process for our new contract with customer. Equipment is double walled tank with double walled inlet/outlet PVC lines. Removal is scheduled for May 3rd. photo 6,7,8,9

COGCC Decision: _____

COGCC Representative:

2 CA# 123550

Corrective Action:

Date: 06/27/2019

Response: CA COMPLETED

Date of Completion: 03/29/2019

Operator Comment:

COGCC Decision: _____

COGCC Representative:

3 CA# 123551

Corrective Action:

Date: 06/27/2019

Response: CA COMPLETED

Date of Completion: 05/03/2019

Operator Comment:

COGCC Decision: _____

COGCC Representative:

4 CA# 123552

Corrective Action:

Date: 04/27/2019

Response: CA COMPLETED

Date of Completion: 04/11/2019

Operator Comment:

COGCC Decision: _____

COGCC Representative:

5 CA# 123553

Corrective Action:

Date: 04/27/2019

Response: CA COMPLETED

Date of Completion: 03/30/2019

Operator Comment:

COGCC Decision: _____

COGCC Representative:

6 CA# 123554

Corrective Action:

Date: 04/27/2019

Response: CA COMPLETED

Date of Completion: 04/11/2019

Operator Comment:

COGCC Decision: _____

COGCC Representative:

7 CA# 123555

Corrective Action:

Date: 06/27/2019

Response: CA COMPLETED

Date of Completion: 04/02/2019

Operator Comment:

COGCC Decision: _____

COGCC Representative:

8 CA# 123556

Corrective Action:

Date: 04/27/2019

Response: CA COMPLETED

Date of Completion: 04/03/2019

Operator Comment:

COGCC Decision: _____

COGCC Representative:

9 CA# 123557

Corrective Action:

Date: 04/27/2019

Response: CA COMPLETED

Date of Completion: 04/10/2019

Operator Comment:

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: Barbara Ries

Signed: _____

Title: Manager

Date: 4/26/2019 4:15:00 PM

ATTACHMENT LIST

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

Document Number **Description**

<u>Document Number</u>	<u>Description</u>

Total Attach: 0 Files