

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:  
402179655

Date Received:  
09/17/2019

FIR RESOLUTION FORM

Overall Status: CAC

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: 10112  
Name of Operator: FOUNDATION ENERGY MANAGEMENT LLC  
Address: 5057 KELLER SPRINGS RD STE 650  
City: ADDISON State: TX Zip: 75001

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

Additional Operator Contact:

Contact Name	Phone	Email
<u>Daniel Lapp</u>	<u>970-629-9525</u>	<u>regulatory@foundationenergy.com</u>

COGCC INSPECTION SUMMARY:

FIR Document Number: 679704792  
Inspection Date: 07/18/2019 FIR Submit Date: 07/18/2019 FIR Status: \_\_\_\_\_

Inspected Operator Information:

Company Name: FOUNDATION ENERGY MANAGEMENT LLC Company Number: 10112  
Address: 5057 KELLER SPRINGS RD STE 650  
City: ADDISON State: TX Zip: 75001

LOCATION - Location ID: 315669

Location Name: KIRBY-EIDSON-64S102W Number: 28NWSW County: RIO BLANCO  
Qtrqr: NWS Sec: 28 Twp: 4S Range: 102W Meridian: 6  
W  
Latitude: 39.669960 Longitude: -108.856674

FACILITY - API Number: 05-103-00 Facility ID: 231304

Facility Name: KIRBY-EIDSON Number: 28-4  
Qtrqr: NWS Sec: 28 Twp: 4S Range: 102W Meridian: 6  
W  
Latitude: 39.669960 Longitude: -108.856674

CORRECTIVE ACTIIONS:

1 CA# 128284

Corrective Action: Securely fasten all valves, pipes, and fittings to ensure good mechanical condition, inspect at regular intervals and maintain in good mechanical condition per Rule 605.d.

Date: 07/25/2019

Response: CA COMPLETED

Date of Completion: 09/10/2019

Operator Comment: Replaced dump controller with a no bleed style

COGCC Decision: \_\_\_\_\_

COGCC  
Representative:

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**OPERATOR COMMENT AND SUBMITTAL**

Comment: action resolved

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

Print Name: Alyssa Beard

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

Title: HSE Manager

Date: 9/17/2019 2:05:48 PM

**ATTACHMENT LIST**

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

**Document Number**      **Description**

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

Total Attach: 0 Files