

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:

402187592

Date Received:

09/24/2019

FIR RESOLUTION FORM

Overall Status: FRQ

CA Summary:

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

0 CA Completed
2 Factual Review Request

OPERATOR INFORMATION

OGCC Operator Number: 10459

Name of Operator: EXTRACTION OIL & GAS INC

Address: 370 17TH STREET SUITE 5300

City: DENVER State: CO Zip: 80202

Contact Name and Telephone:

Name: _____

Phone: () _____ Fax: () _____

Email: _____

Additional Operator Contact:

Contact Name

Phone

Email

Jeff Rickard

jrickard@extractionog.com

COGCC INSPECTION SUMMARY:

FIR Document Number: 699300235

Inspection Date: 09/23/2019

FIR Submit Date: 09/23/2019

FIR Status: _____

Inspected Operator Information:

Company Name: EXTRACTION OIL & GAS INC

Company Number: 10459

Address: 370 17TH STREET SUITE 5300

City: DENVER State: CO Zip: 80202

LOCATION - Location ID: 318682

Location Name: LEONARD Number: 62N67W County: WELD
/21NESW

Qtrqr: NESW Sec: 21 Twp: 2N Range: 67W Meridian: 6

Latitude: 40.121920 Longitude: -104.897970

FACILITY - API Number: 05-123- -00 Facility ID: 241898

Facility Name: LEONARD Number: 23-21

Qtrqr: NESW Sec: 21 Twp: 2N Range: 67W Meridian: 6

Latitude: 40.121920 Longitude: -104.897970

CORRECTIVE ACTIONS:

1 CA# 130973

Corrective Action: Comply with Rule 603.f

Date: 10/03/2019

Response: FACTUAL REVIEW REQUEST

Basis for Review: Equipment is not owned or controlled by the operator

Operator Comment: As of July 1st, 2019, KPK is the operator of the well. Please see Form 10 DOC#402098198.

COGCC Decision: _____

COGCC
Representative:

2 CA# 130974

Corrective Action: Comply with Rule 210.e

Date: 10/23/2019

Response: FACTUAL REVIEW REQUEST

Basis for Review: Equipment is not owned or controlled by the operator

Operator
Comment: As of July 1st, 2019, KPK is the operator of the well. Please see Form 10 DOC#402098198.

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: Jeff Rickard

Signed:

Title: Regulatory Compliance Coo

Date: 9/24/2019 3:14:34 PM

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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Total Attach: 0 Files