

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:

402199371

Date Received:

10/04/2019

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: 10133
Name of Operator: HILCORP ENERGY COMPANY

Address: P O BOX 61229

City: HOUSTON State: TX Zip: 77208

Contact Name and Telephone:

Name: _____

Phone: () _____ Fax: () _____

Email: _____

Additional Operator Contact:

Contact Name	Phone	Email
<u>Fischer, Alex</u>		<u>alex.fischer@state.co.us</u>
<u>Heil, John</u>		<u>john.heil@state.co.us</u>
<u>Shorty, Priscilla</u>		<u>pshorty@hilcorp.com</u>
<u>Walker, Mandi</u>	<u>505-324-5122</u>	<u>mwalker@hilcorp.com</u>

COGCC INSPECTION SUMMARY:

FIR Document Number: 688800631

Inspection Date: 09/09/2019

FIR Submit Date: 10/03/2019

FIR Status: _____

Inspected Operator Information:

Company Name: HILCORP ENERGY COMPANY

Company Number: 10133

Address: P O BOX 61229

City: HOUSTON State: TX Zip: 77208

LOCATION - Location ID: 325974

Location Name: BONDAD 33-10-N33N10W Number: 4NESE County: LA PLATA

Qtrqtr: NESE Sec: 4 Twp: 33N Range: 10W Meridian: N

Latitude: 37.129330 Longitude: -107.935190

FACILITY - API Number: 05-067- -00 Facility ID: 215662

Facility Name: BONDAD 33-10 Number: 100

Qtrqtr: NESE Sec: 4 Twp: 33N Range: 10W Meridian: N

Latitude: 37.129330 Longitude: -107.935190

CORRECTIVE ACTIONS:

1 CA# 131366

Corrective Action: Install sign to comply with Rule 210.d. FIRR #402183993 received on 9/20/19 reported that this corrective action from the previous inspection report has been completed

Date: 10/21/2019

Response: CA COMPLETED

Date of Completion: 09/20/2019

Prior FIRR 402183993 was submitted with the pictures showing the the NFPA placards were installed. Please

Operator
Comment: see attached photos

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: Amanda Walker

Signed: _____

Title: Operation/Regulatory Tech

Date: 10/4/2019 7:47:09 AM

ATTACHMENT LIST

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

<u>Document Number</u>	<u>Description</u>
402199381	Tank Battery 1
402199383	Tank Battery 2
402199385	Tank Battery 3

Total Attach: 3 Files