

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:
402235393

Date Received:
11/11/2019

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: 17320

Name of Operator: CITY & COUNTY OF DENVER

Address: 8500 PENA BLVD CONCOUR A #4385

City: DENVER State: CO Zip: 80249

Contact Name and Telephone:

Name: _____

Phone: () _____ Fax: () _____

Email: _____

Additional Operator Contact:

Contact Name

Phone

Email

- dnr_cogccengineering@state.co.us

Branting, Julie 303-638-7484 Petropro@comcast.net

COGCC INSPECTION SUMMARY:

FIR Document Number: 693501441

Inspection Date: 09/26/2019

FIR Submit Date: 09/26/2019

FIR Status: _____

Inspected Operator Information:

Company Name: CITY & COUNTY OF DENVER

Company Number: 17320

Address: 8500 PENA BLVD CONCOUR A #4385

City: DENVER State: CO Zip: 80249

LOCATION - Location ID: 319712

Location Name: BOX ELDER-62S66W Number: 12NENE County: ADAMS

Qtrqtr: NENE Sec: 12 Twp: 2S Range: 66W Meridian: 6

Latitude: 39.897520 Longitude: -104.717040

FACILITY - API Number: 05-001- -00 Facility ID: 208834

Facility Name: BOX ELDER Number: A-1

Qtrqtr: NENE Sec: 12 Twp: 2S Range: 66W Meridian: 6

Latitude: 39.897520 Longitude: -104.717040

CORRECTIVE ACTIONS:

1 CA# 131142

Corrective Action: Comply with rule 603 f

Date: 10/26/2019

Response: CA COMPLETED

Date of Completion: 11/14/2019

Operator Comment: Moved old equipment to pipe yard after plugging

COGCC Decision: _____

COGCC
Representative:

2 CA# 131143

Corrective Action: Perform successful mechanical integrity test. If a successful MIT can not be performed within 30 day CA time the well must be plugged within 3 months per Rule 326 and 208.

Date: 10/26/2019

Response: CA COMPLETED

Date of Completion: 10/08/2019

Operator
Comment:

Ran MIT, COGCC Doc # 402235154, Well plugged COGCC Doc #402235205

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: Julie Branting

Signed:

Title: Agent

Date: 11/11/2019 9:01:33 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>
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Total Attach: 0 Files