

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:  
402263361

Date Received:  
12/16/2019

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: 10071  
Name of Operator: HIGHPOINT OPERATING CORPORATION  
Address: 555 17TH ST STE 3700  
City: DENVER State: CO Zip: 80202  
Contact Name and Telephone:  
Name: \_\_\_\_\_  
Phone: ( ) \_\_\_\_\_ Fax: ( ) \_\_\_\_\_  
Email: \_\_\_\_\_

Additional Operator Contact:

Contact Name	Phone	Email
<u>James, Brian</u>		<u>dnr_cogccengineering@state.co.us</u>
<u>Brown, Tim</u>		<u>bjames@hpres.com</u>
<u>Pesicka, Conor</u>		<u>tbrown@hpres.com</u>
		<u>conor.pesicka@state.co.us</u>

COGCC INSPECTION SUMMARY:

FIR Document Number: 696101438  
Inspection Date: 10/17/2019 FIR Submit Date: 10/18/2019 FIR Status: \_\_\_\_\_

Inspected Operator Information:

Company Name: HIGHPOINT OPERATING CORPORATION Company Number: 10071  
Address: 555 17TH ST STE 3700  
City: DENVER State: CO Zip: 80202

LOCATION - Location ID: 332236

Location Name: SIEBRING-65N63W Number: 32SENE County: \_\_\_\_\_  
Qtrqtr: SENE Sec: 32 Twp: 5N Range: 63W Meridian: 6  
Latitude: 40.357800 Longitude: -104.452890

FACILITY - API Number: 05-123-00 Facility ID: 332236

Facility Name: SIEBRING-65N63W Number: 32SENE  
Qtrqtr: SENE Sec: 32 Twp: 5N Range: 63W Meridian: 6  
Latitude: 40.357800 Longitude: -104.452890

CORRECTIVE ACTIONS:

1  CA# 131785

Corrective Action: \* Post Emergency number at wellsite. Comply w/ Rule 210.b.

Date: 11/18/2019

Response: CA COMPLETED Date of Completion: 11/18/2019

Emergency number posted at wellsite.

Operator  
Comment:

COGCC Decision: Approved

COGCC  
Representative:

Field Inspection Report doc #696101686 dated 12/10/2019 confirms that valid Emergency number now posted at wellsite.  
Corrective Action appears addressed.

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: Cory Neighbors

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

Title: Landman

Date: 12/16/2019 8:47:48 AM

**ATTACHMENT LIST**

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

**Document Number      Description**

402263361	FIR RESOLUTION SUBMITTED
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Total Attach: 1 Files