

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:
402273108

Date Received:
12/27/2019

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: 69175

Name of Operator: PDC ENERGY INC

Address: 1775 SHERMAN STREET - STE 3000

City: DENVER State: CO Zip: 80203

Contact Name and Telephone:

Name: _____

Phone: () _____ Fax: () _____

Email: _____

Additional Operator Contact:

Contact Name

Phone

Email

Tyranny Bergin

970-313-5547

EHSCOGCCInspections@pdce.com

COGCC INSPECTION SUMMARY:

FIR Document Number: 697500535

Inspection Date: 08/27/2019

FIR Submit Date: 09/02/2019

FIR Status: _____

Inspected Operator Information:

Company Name: PDC ENERGY INC

Company Number: 69175

Address: 1775 SHERMAN STREET - STE 3000

City: DENVER State: CO Zip: 80203

LOCATION - Location ID: 331991

Location Name: GADDIS-64N68W Number: 36SEnw County: _____

Qtrqr: SEnw Sec: 36 Twp: 4N Range: 68W Meridian: 6

Latitude: 40.271420 Longitude: -104.953970

FACILITY - API Number: 05-123-00 Facility ID: 331991

Facility Name: GADDIS-64N68W Number: 36SEnw

Qtrqr: SEnw Sec: 36 Twp: 4N Range: 68W Meridian: 6

Latitude: 40.271420 Longitude: -104.953970

CORRECTIVE ACTIIONS:

1 CA# 129932

Corrective Action: Comply with Rule 1004. Collaborate with the landowner to determine mitigating measures that will allow reclamation work to be conducted in such a manner as to not interfere with agricultural activities or crop production.

Date: 08/27/2019

Corrective action date is the date the location was observed out of compliance.

Response: CA COMPLETED

Date of Completion: 12/17/2019

Operator Comment: Reclamation work has finished and CA is complete.

COGCC Decision: _____

COGCC
Representative:

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OPERATOR COMMENT AND SUBMITTAL

Comment: Reclamation work has finished and CA is complete.

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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: Tyranny Bergin

Signed: _____

Title: EHS Coordinator

Date: 12/27/2019 2:11:02 PM

ATTACHMENT LIST

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

Document Number **Description**

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

Total Attach: 0 Files