

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:
402343216

Date Received:
03/15/2020

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: 10454
Name of Operator: PETROSHARE CORPORATION
Address: 9635 MAROON CIRCLE #400
City: ENGLEWOOD State: CO Zip: 80112

Contact Name and Telephone:
Name: _____
Phone: () _____ Fax: () _____
Email: _____

Additional Operator Contact:

Contact Name	Phone	Email
<u>Meghan Grimes</u>		<u>mgrimes@petrosharecorp.com</u>
<u>Devin Brown</u>		<u>dbrown@petrosharecorp.com</u>

COGCC INSPECTION SUMMARY:

FIR Document Number: 682403942
Inspection Date: 08/29/2018 FIR Submit Date: 08/30/2018 FIR Status: _____

Inspected Operator Information:

Company Name: PETROSHARE CORPORATION Company Number: 10454
Address: 9635 MAROON CIRCLE #400
City: ENGLEWOOD State: CO Zip: 80112

LOCATION - Location ID: 319769

Location Name: TSUZUKI-61S67W Number: 28NENE County: _____
Qtrqtr: NENE Sec: 28 Twp: 1S Range: 67W Meridian: 6
Latitude: 39.940289 Longitude: -104.887921

FACILITY - API Number: 05-001-00 Facility ID: 319769

Facility Name: TSUZUKI-61S67W Number: 28NENE
Qtrqtr: NENE Sec: 28 Twp: 1S Range: 67W Meridian: 6
Latitude: 39.940289 Longitude: -104.887921

CORRECTIVE ACTION:

1 CA# 118306

Corrective Action: Comply with Rule 1004 to perform reclamation as soon as practicable and immediately control weeds. Previous corrective actions remain unresolved; therefore, corrective action dates remain unchanged.

Date: 07/31/2018

Response: CA COMPLETED Date of Completion: 03/13/2020

Operator Comment: Home sites have been built around this location. PetroShare would like to request a new inspection of this well site. Please see photo.

COGCC Decision: _____

COGCC
Representative:

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OPERATOR COMMENT AND SUBMITTAL

Comment: Photo attached; requesting new inspection.

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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: Meghan Grimes

Signed: _____

Title: Regulatory Manager

Date: 3/15/2020 11:21:23 PM

ATTACHMENT LIST

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

Document Number **Description**

402343217	Home site around well site
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Total Attach: 1 Files