

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:

402343333

Date Received:

03/16/2020

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: 20275
Name of Operator: CORAL PRODUCTION CORP
Address: 1600 STOUT ST STE 1500
City: DENVER State: CO Zip: 80202

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

Additional Operator Contact:

Contact Name	Phone	Email
<u>Wieger, Jim</u>	<u>(303) 623-3573</u>	<u>JIMWIEGER@QWESTOFFICE.NET</u>
<u>Chonka, Jim</u>	<u>(303) 623-3573</u>	<u>jpchonka@netscape.net</u>

COGCC INSPECTION SUMMARY:

FIR Document Number: 688307195
Inspection Date: 03/05/2020 FIR Submit Date: 03/09/2020 FIR Status: _____

Inspected Operator Information:

Company Name: CORAL PRODUCTION CORP Company Number: 20275
Address: 1600 STOUT ST STE 1500
City: DENVER State: CO Zip: 80202

LOCATION - Location ID: 317135

Location Name: CHRISTIANSON B-63S50W Number: 27NENW County: WASHINGTON
Qtrqtr: NENW Sec: 27 Twp: 3S Range: 50W Meridian: 6
Latitude: 39.769960 Longitude: -102.965280

FACILITY - API Number: 05-121-00 Facility ID: 236707

Facility Name: CHRISTIANSON B Number: 3
Qtrqtr: NENW Sec: 27 Twp: 3S Range: 50W Meridian: 6
Latitude: 39.769960 Longitude: -102.965280

CORRECTIVE ACTION:

1 CA# 137048

Corrective Action: Securely fasten all valves, pipes, and fittings to ensure good mechanical condition, inspect at regular intervals and maintain in good mechanical condition per Rule 605.d.

Date: 03/24/2020

For localized stained soils or oily waste - Properly treat or dispose of oily waste in accordance with 907.e.

Response: CA COMPLETED

Date of Completion: 03/10/2020

Operator Comment: Valves and pipes have been inspected and secured. Oily soil has been removed.

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: JIM WIEGER

Signed: _____

Title: GEOLOGIST

Date: 3/16/2020 8:48:39 AM

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