

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:
402343853

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: 47120
Name of Operator: KERR MCGEE OIL & GAS ONSHORE LP
Address: P O BOX 173779
City: DENVER State: CO Zip: 80217-3779
Contact Name and Telephone:
Name: _____
Phone: () _____ Fax: () _____
Email: _____

Additional Operator Contact:

Contact Name	Phone	Email
<u>Luke Reddy</u>	<u>970-515-1292</u>	<u>luke_reddy@oxy.com</u>

COGCC INSPECTION SUMMARY:

FIR Document Number: 679602414
Inspection Date: 03/13/2020 FIR Submit Date: 03/13/2020 FIR Status: _____

Inspected Operator Information:

Company Name: KERR MCGEE OIL & GAS ONSHORE LP Company Number: 47120
Address: P O BOX 173779
City: DENVER State: CO Zip: 80217-3779

LOCATION - Location ID: 333268

Location Name: POUDRE-66N67W Number: 28SESW County: _____
Qtrqr: SESW Sec: 28 Twp: 6N Range: 67W Meridian: 6
Latitude: 40.453322 Longitude: -104.900036

FACILITY - API Number: 05-123-00 Facility ID: 333268

Facility Name: POUDRE-66N67W Number: 28SESW
Qtrqr: SESW Sec: 28 Twp: 6N Range: 67W Meridian: 6
Latitude: 40.453322 Longitude: -104.900036

CORRECTIVE ACTIONS:

1 CA# 137189

Corrective Action: Comply with Rule 603.f. Date: 12/18/2019

Response: CA COMPLETED Date of Completion: 03/16/2020

Operator Comment: The horses head behind pumping unit cannot be removed. It is needed when the well is put back online. Removing the horses head from the pumping unit is part of the shut-in process of a well with a pumping unit on it.

COGCC Decision: _____

COGCC
Representative: _____

OPERATOR COMMENT AND SUBMITTAL

Comment: The horses head behind pumping unit cannot be removed. It is needed when the well is put back online. Removing the horses head from the pumping unit is part of the shut-in process of a well with a pumping unit on it.

I hereby certify that the statements made in this form are, to the best of my knowledge, true, correct, and complete.

Print Name: Luke Reddy

Signed: _____

Title: Regulatory Specialist

Date: 3/16/2020 12:20:19 PM

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