

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:
402358736

Date Received:
04/01/2020

FIR RESOLUTION FORM

Overall Status: CAC

CA Summary:

2 of 3 CAs from the FIR responded to on this Form

2 CA Completed
0 Factual Review Request

OPERATOR INFORMATION

OGCC Operator Number: 10112
Name of Operator: FOUNDATION ENERGY MANAGEMENT LLC
Address: 5057 KELLER SPRINGS RD STE 650
City: ADDISON State: TX Zip: 75001

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

Additional Operator Contact:

Contact Name	Phone	Email
<u>Bill Scofield</u>	<u>303-887-2781</u>	<u>regulatory@foundationenergy.com</u>

COGCC INSPECTION SUMMARY:

FIR Document Number: 696300720
Inspection Date: 10/18/2019 FIR Submit Date: 10/18/2019 FIR Status: _____

Inspected Operator Information:

Company Name: FOUNDATION ENERGY MANAGEMENT LLC Company Number: 10112
Address: 5057 KELLER SPRINGS RD STE 650
City: ADDISON State: TX Zip: 75001

LOCATION - Location ID: 413187

Location Name: CHALK Number: 31-13 County: WELD
Qtrqr: SWS Sec: 31 Twp: 8N Range: 59W Meridian: 6
W
Latitude: 40.613290 Longitude: -104.028465

FACILITY - API Number: 05-123-00 Facility ID: 413306

Facility Name: CHALK Number: 31-13
Qtrqr: SWS Sec: 31 Twp: 8N Range: 59W Meridian: 6
W
Latitude: 40.613290 Longitude: -104.028465

CORRECTIVE ACTIIONS:

1 CA# 131822

Corrective Action: Action: Repair and paint tanks per Rule 804. Date: 04/20/2020

Response: CA COMPLETED Date of Completion: 03/31/2020

Operator Comment: Repainted tanks

COGCC Decision: Approved

COGCC Representative: Approved

2 CA# 131823

Corrective Action: Repair and paint tanks per Rule 804.

Date: 04/20/2020

Response: CA COMPLETED

Date of Completion: 03/31/2020

Operator Comment: Repainted tanks

COGCC Decision: Approved

COGCC Representative: Approved

OPERATOR COMMENT AND SUBMITTAL

Comment: Corrective action completed

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

Print Name: Alyssa Beard

Signed: _____

Title: HSE Manager

Date: 4/1/2020 9:23:40 AM

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>
402358736	FIR RESOLUTION SUBMITTED
402358740	Chalk Tanks Repainted

Total Attach: 2 Files