

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:

402356674

Date Received:

03/30/2020

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: 10133
Name of Operator: HILCORP ENERGY COMPANY
Address: P O BOX 61229
City: HOUSTON State: TX Zip: 77208

Contact Name and Telephone:

Name: _____

Phone: () _____ Fax: () _____

Email: _____

Additional Operator Contact:

Contact Name	Phone	Email
<u>Ray, Mandy</u>	<u>(505) 599-4083</u>	<u>mray@hilcorp.com</u>
<u>Shorty, Priscilla</u>		<u>pshorty@hilcorp.com</u>

COGCC INSPECTION SUMMARY:

FIR Document Number: 693901562

Inspection Date: 03/18/2020

FIR Submit Date: 03/23/2020

FIR Status: _____

Inspected Operator Information:

Company Name: HILCORP ENERGY COMPANY Company Number: 10133
Address: P O BOX 61229
City: HOUSTON State: TX Zip: 77208

LOCATION - Location ID: 326473

Location Name: RHOADES-N35N8W Number: 33SWSW County: LA PLATA
Qtrqr: SWS Sec: 33 Twp: 35N Range: 8W Meridian: N
W
Latitude: 37.254650 Longitude: -107.758400

FACILITY - API Number: 05-067- -00 Facility ID: 216552

Facility Name: RHOADES Number: 3-33
Qtrqr: SWS Sec: 33 Twp: 35N Range: 8W Meridian: N
W
Latitude: 37.254650 Longitude: -107.758400

CORRECTIVE ACTIONS:

1 ☒ CA# 137381

Corrective Action: Erosion controls (ie blankets, revegetation) are needed on bare soils until stabilized with desirable perennial vegetation. Stormwater controls (BMPs) are needed at run-on point along access where erosional channeling is occurring.

Date: 04/24/2020

Response: CA COMPLETED Date of Completion: 03/30/2020

Seeded area's that needed seeded and installed erosion blankets and Storm water controls.

Operator _____
Comment: _____

COGCC Decision: Approved pending re-inspection

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: Mandi Walker

Signed: _____

Title: Operation/Regulatory Tech

Date: 3/30/2020 2:05:43 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>
402356674	FIR RESOLUTION SUBMITTED
402356681	Erosion blanket
402356682	Erosion blanket
402356684	Erosion blanket

Total Attach: 4 Files