

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:

402366615

Date Received:

04/09/2020

FIR RESOLUTION FORM

Overall Status: CAC

CA Summary:

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

1 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

Alyssa Beard

3032448114

abeard@foundationenergy.com

COGCC INSPECTION SUMMARY:

FIR Document Number: 696200886

Inspection Date: 12/09/2019

FIR Submit Date: 12/27/2019

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: 323461

Location Name: SOONER UNIT-68N58W Number: 28NWNE County: _____

Qtrqr: NWNE Sec: 28 Twp: 8N Range: 58W Meridian: 6

Latitude: 40.638140 Longitude: -103.865680

FACILITY - API Number: 05-123- -00 Facility ID: 323461

Facility Name: SOONER UNIT-68N58W Number: 28NWNE

Qtrqr: NWNE Sec: 28 Twp: 8N Range: 58W Meridian: 6

Latitude: 40.638140 Longitude: -103.865680

CORRECTIVE ACTIONS:

1 CA# 135603

Corrective Action: Comply with 1004.a and remove equipment from the location and access road.

Date: 06/27/2019

Response: CA COMPLETED

Date of Completion: 03/23/2020

Operator
Comment:

Power poles were removed from location by the electrical service company as their schedule allowed.

COGCC Decision: _____

COGCC
Representative: _____

OPERATOR COMMENT AND SUBMITTAL

Comment: The power poles formerly in place at the Sooner 2-28 were removed recently by Morgan County REA as their schedule and weather conditions allowed.
Thanks

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: EHSR MANAGER

Date: 4/9/2020 2:03:19 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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402366955	Power pole removed photolog
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Total Attach: 1 Files