

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:

402397673

Date Received:

05/13/2020

FIR RESOLUTION FORM

Overall Status: CAC

CA Summary:

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

2 CA Completed
0 Factual Review Request

OPERATOR INFORMATION

OGCC Operator Number: 10506

Name of Operator: SEELEY OIL COMPANY LLC

Address: PO BOX 9015

City: SALT LAKE State: UT Zip: 84109

Contact Name and Telephone:

Name: _____

Phone: () _____ Fax: () _____

Email: _____

Additional Operator Contact:

Contact Name

Seeley, Nathaniel

Phone

(970) 565-2136

Email

nathaniel@seeleyoil.com

COGCC INSPECTION SUMMARY:

FIR Document Number: 693900938

Inspection Date: 10/11/2019

FIR Submit Date: 10/18/2019

FIR Status: _____

Inspected Operator Information:

Company Name: SEELEY OIL COMPANY LLC

Company Number: 10506

Address: PO BOX 9015

City: SALT LAKE State: UT Zip: 84109

LOCATION - Location ID: 313559

Location Name: ISLAND BUTTE UNIT II- Number: 22SWSW County: MONTEZUMA
N38N19W

Qtrqtr: SWS Sec: 22 Twp: 38N Range: 19W Meridian: N
W

Latitude: 37.531240 Longitude: -108.939350

FACILITY - API Number: 05-083- -00 Facility ID: 224474

Facility Name: ISLAND BUTTE UNIT II Number: 6

Qtrqtr: SWS Sec: 22 Twp: 38N Range: 19W Meridian: N
W

Latitude: 37.531240 Longitude: -108.939350

CORRECTIVE ACTIONS:

1 CA# 131842

Corrective Action: Remove unused equipment. Corrective action is back-dated to document time that location is out of compliance.

Date: 11/04/2018

Response: CA COMPLETED

Date of Completion: 03/12/2020

Operator Comment: All risers have been removed.

COGCC Decision: _____

COGCC
Representative: _____

2 CA# 131843

Corrective Action: Reclaim areas not needed for production operations within the spring 2020 planting window.

Date: 05/01/2020

Response: CA COMPLETED

Date of Completion: 05/07/2020

Operator
Comment: The unused portions of the location have been interim reclaimed.

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: Nathaniel Seeley

Signed: _____

Title: VP

Date: 5/13/2020 3:54:08 PM

ATTACHMENT LIST

View Attachments in Imaged Documents on COGCC website (<http://ogccweblink.state.co.us/>) - Search by Document Number.

Document Number **Description**

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Total Attach: 0 Files