

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:

402402304

Date Received:

05/19/2020

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: 69175

Name of Operator: PDC ENERGY INC

Address: 1775 SHERMAN STREET - STE 3000

City: DENVER State: CO Zip: 80203

Contact Name and Telephone:

Name: _____

Phone: () _____ Fax: () _____

Email: _____

Additional Operator Contact:

Contact Name

Phone

Email

Tyranny Bergin

970-313-5547

EHSCOGCCInspections@pdce.com

COGCC INSPECTION SUMMARY:

FIR Document Number: 697600923

Inspection Date: 04/30/2020

FIR Submit Date: 05/07/2020

FIR Status: _____

Inspected Operator Information:

Company Name: PDC ENERGY INC

Company Number: 69175

Address: 1775 SHERMAN STREET - STE 3000

City: DENVER State: CO Zip: 80203

LOCATION - Location ID: _____

Location Name: _____ Number: _____ County: _____

Qtrqr: NENE Sec: 29 Twp: 2N Range: 66W Meridian: 6

Latitude: 40.112399 Longitude: -104.797044

FACILITY - API Number: 05-123-00 Facility ID: 471003

Facility Name: Shivers Number: 1 & 14-29

Qtrqr: NENE Sec: 29 Twp: 2N Range: 66W Meridian: 6

Latitude: 40.112399 Longitude: -104.797044

CORRECTIVE ACTIONS:

1 ☒ CA# 138800

Corrective Action: request closure of spill based on approved project with investigation and remediation to be performed as part of REM 15233 or provide data justifying closure of spill

Date: 05/18/2020

Response: CA COMPLETED

Date of Completion: 05/11/2020

Operator Comment: Form 19 doc. #402394888 has been submitted and approved. CA complete.

COGCC Decision: Approved

supplemental form 19 submitted by operator and spill now closed with ongoing remediation project at site of spill

COGCC
Representative:

OPERATOR COMMENT AND SUBMITTAL

Comment: Form 19 doc. #402394888 has been submitted and approved. CA complete.

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

Print Name: Tyranny Bergin

Signed:

Title: EHS Coordinator

Date: 5/19/2020 5:04:31 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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402402304	FIR RESOLUTION SUBMITTED
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Total Attach: 1 Files