

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:
402423304

Date Received:
06/16/2020

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: 47120
Name of Operator: KERR MCGEE OIL & GAS ONSHORE LP
Address: P O BOX 173779
City: DENVER State: CO Zip: 80217-3779
Contact Name and Telephone:
Name: _____
Phone: () _____ Fax: () _____
Email: _____

Additional Operator Contact:

Contact Name	Phone	Email
<u>Paul McCarville</u>	<u>970-301-1579</u>	<u>paul_mccarville@oxy.com</u>

COGCC INSPECTION SUMMARY:

FIR Document Number: 690005981
Inspection Date: 06/15/2020 FIR Submit Date: 06/15/2020 FIR Status: _____

Inspected Operator Information:

Company Name: KERR MCGEE OIL & GAS ONSHORE LP Company Number: 47120
Address: P O BOX 173779
City: DENVER State: CO Zip: 80217-3779

LOCATION - Location ID: 317851

Location Name: HELEN E. KARICH UNIT-63N66W Number: 32NENE County: _____
Qtrqtr: NENE Sec: 32 Twp: 3N Range: 66W Meridian: 6
Latitude: 40.185430 Longitude: -104.795950

FACILITY - API Number: 05-123-00 Facility ID: 317851

Facility Name: HELEN E. KARICH UNIT-63N66W Number: 32NENE
Qtrqtr: NENE Sec: 32 Twp: 3N Range: 66W Meridian: 6
Latitude: 40.185430 Longitude: -104.795950

CORRECTIVE ACTIONS:

1 CA# 139735

Corrective Action: Install sign to comply with Rule 210.b.

Date: 07/15/2020

Response: CA COMPLETED

Date of Completion: 06/15/2020

Operator Comment: Reattached the wellhead sign to the bull guard.

COGCC Decision: _____

COGCC
Representative:

2 CA# 139736

Corrective Action: Comply with Rule 603.f .

Date: 06/22/2020

Response: CA COMPLETED

Date of Completion: 06/15/2020

Operator
Comment:

Weeds removed.

COGCC Decision: _____

COGCC
Representative:

OPERATOR COMMENT AND SUBMITTAL

Comment: Reattached the wellhead sign to the bull guard and removed weeds.

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

Print Name: Callie Fiddes

Signed: _____

Title: Regulatory Analyst

Date: 6/16/2020 9:53:51 AM

ATTACHMENT LIST

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

Document Number **Description**

--	--

Total Attach: 0 Files