

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:

402447238

Date Received:

07/21/2020

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: 10110
Name of Operator: GREAT WESTERN OPERATING COMPANY LLC
Address: 1001 17TH STREET #2000
City: DENVER State: CO Zip: 80202

Contact Name and Telephone:
Name: _____
Phone: () _____ Fax: () _____
Email: _____

Additional Operator Contact:

Contact Name	Phone	Email
<u>KELLY PALUCH</u>	<u>970-364-2812</u>	<u>cogccinspections@gwogco.com</u>

COGCC INSPECTION SUMMARY:

FIR Document Number: 697001464
Inspection Date: 06/19/2020 FIR Submit Date: 06/19/2020 FIR Status: _____

Inspected Operator Information:

Company Name: GREAT WESTERN OPERATING COMPANY LLC Company Number: 10110
Address: 1001 17TH STREET #2000
City: DENVER State: CO Zip: 80202

LOCATION - Location ID: 454115

Location Name: SCHNEIDER HD NORTH PAD Number: _____ County: _____
Qtrqr: NWS Sec: 7 Twp: 4N Range: 66W Meridian: 6
W
Latitude: 40.324003 Longitude: -104.826894

FACILITY - API Number: 05-123-00 Facility ID: 454115

Facility Name: SCHNEIDER HD NORTH PAD Number: _____
Qtrqr: NWS Sec: 7 Twp: 4N Range: 66W Meridian: 6
W
Latitude: 40.324003 Longitude: -104.826894

CORRECTIVE ACTIONS:

1 CA# 139884

Corrective Action: Install sign to comply with Rule 210.b. Date: 09/21/2020

Response: CA COMPLETED Date of Completion: 07/16/2020

Operator Comment: CORRECTIVE ACTION COMPLETED - SEE ATTACHED PHOTO(S)

COGCC Decision: _____

COGCC Representative: _____

2 CA# 139885

Corrective Action: Repair or install berms or other secondary containment devices per Rule 906.d.(1).

Date: 08/03/2020

Response: CA COMPLETED

Date of Completion: 07/16/2020

Operator Comment:

CORRECTIVE ACTION COMPLETED - SEE ATTACHED PHOTO(S)

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: KELLY PALUCH

Signed: _____

Title: SR. ADMIN ASSISTANT

Date: 7/21/2020 10:06:38 AM

ATTACHMENT LIST

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

Document Number	Description
402447261	SCHNEIDER FIRR PHOTO #1
402447262	SCHNEIDER FIRR PHOTO #2
402447263	SCHNEIDER FIRR PHOTO #3
402447264	SCHNEIDER FIRR PHOTO #4
402447267	SCHNEIDER FIRR PHOTO #5
402447268	SCHNEIDER FIRR PHOTO #6

Total Attach: 6 Files