

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:  
402448331

Date Received:  
07/22/2020

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: 10559  
Name of Operator: SOUTHLAND ROYALTY COMPANY LLC  
Address: 400 WEST 7TH STREET  
City: FORT WORTH State: TX Zip: 76102  
Contact Name and Telephone:  
Name: \_\_\_\_\_  
Phone: ( ) \_\_\_\_\_ Fax: ( ) \_\_\_\_\_  
Email: \_\_\_\_\_

Additional Operator Contact:

Contact Name	Phone	Email
<u>Gallenbeck, Danny</u>		<u>dgallenbeck@ctfieldsvcs.com</u>
<u>Blaylock, Connie</u>		<u>cblaylock@mspartners.com</u>
<u>Elgin, Jerry</u>		<u>jelgin@mspartners.com</u>

COGCC INSPECTION SUMMARY:

FIR Document Number: 689804452  
Inspection Date: 07/21/2020 FIR Submit Date: 07/21/2020 FIR Status: \_\_\_\_\_

Inspected Operator Information:

Company Name: SOUTHLAND ROYALTY COMPANY LLC Company Number: 10559  
Address: 400 WEST 7TH STREET  
City: FORT WORTH State: TX Zip: 76102

LOCATION - Location ID: 313060

Location Name: PEPPLER FEE-612N91W Number: 18SWNW County: MOFFAT  
Qtrqr: SWN Sec: 18 Twp: 12N Range: 91W Meridian: 6  
Latitude: 40.997317 Longitude: -107.657625

FACILITY - API Number: 05-081- -00 Facility ID: 223491

Facility Name: PEPPLER FEE COM Number: 12-18  
Qtrqr: SWN Sec: 18 Twp: 12N Range: 91W Meridian: 6  
Latitude: 40.997317 Longitude: -107.657625

CORRECTIVE ACTIONS:

1 CA# 140611

Corrective Action: Submit for Form 4 to request approval for TA status. Date: 07/31/2020  
Response: CA COMPLETED Date of Completion: 07/22/2020

Form 4 for continued TA status has been filed as of 7/22/20.

Operator \_\_\_\_\_  
Comment: \_\_\_\_\_

COGCC Decision: \_\_\_\_\_

COGCC  
Representative: \_\_\_\_\_

OPERATOR COMMENT AND SUBMITTAL

Comment: Form 4 for continued TA status has been filed as of 7/22/20.

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

Print Name: Connie Blaylock

Signed: \_\_\_\_\_

Title: Regulatory Analyst

Date: 7/22/2020 9:29:59 AM

**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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402448333	Form 4 Submitted
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Total Attach: 1 Files