

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:

402462065

Date Received:

08/07/2020

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: 200077

Name of Operator: CHARLES P DUNNING LLC

Address: PO BOX 1365

City: FORT MORGAN State: CO Zip: 80701

Contact Name and Telephone:

Name: \_\_\_\_\_

Phone: ( ) \_\_\_\_\_ Fax: ( ) \_\_\_\_\_

Email: \_\_\_\_\_

Additional Operator Contact:

Contact Name

Phone

Email

Dunning, Chuck

303-408-2575

chuck.dunning@me.com

COGCC INSPECTION SUMMARY:

FIR Document Number: 687400818

Inspection Date: 07/29/2020

FIR Submit Date: 07/29/2020

FIR Status: \_\_\_\_\_

Inspected Operator Information:

Company Name: CHARLES P DUNNING LLC

Company Number: 200077

Address: PO BOX 1365

City: FORT MORGAN State: CO Zip: 80701

LOCATION - Location ID: 319644

Location Name: JOLLY-PLATTS-63S58W Number: 34NWSW County: \_\_\_\_\_

Qtrqr: NWS Sec: 34 Twp: 3S Range: 58W Meridian: 6  
W

Latitude: 39.744847 Longitude: -103.866168

FACILITY - API Number: 05-001- -00 Facility ID: 319644

Facility Name: JOLLY-PLATTS-63S58W Number: 34NWSW

Qtrqr: NWS Sec: 34 Twp: 3S Range: 58W Meridian: 6  
W

Latitude: 39.744847 Longitude: -103.866168

CORRECTIVE ACTIONS:

1 CA# 140842

Corrective Action: Comply with Rule 603.f .

Date: 08/28/2020

Response: CA COMPLETED

Date of Completion: 08/02/2020

Operator  
Comment:

All deficiencies have been corrected to the best of my knowledge.

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

COGCC  
Representative:

**2** CA# 140843

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

Date: 08/28/2020

Response: CA COMPLETED

Date of Completion: 08/02/2020

Operator  
Comment:

All deficiencies have been corrected to the best of my knowledge.

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

COGCC  
Representative:

OPERATOR COMMENT AND SUBMITTAL

Comment: All deficiencies have been corrected to the best of my knowledge.

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

Print Name: Chuck Dunning

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

Title: Owner

Date: 8/7/2020 11:58:05 AM

**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