

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:

402480328

Date Received:

09/02/2020

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: 697501666

Inspection Date: 06/16/2020

FIR Submit Date: 06/25/2020

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: 320417

Location Name: MCELWAIN-61S67W Number: 17NENE County: _____

Qtrqr: NENE Sec: 17 Twp: 1S Range: 67W Meridian: 6

Latitude: 39.969559 Longitude: -104.905442

FACILITY - API Number: 05-001- -00 Facility ID: 320417

Facility Name: MCELWAIN-61S67W Number: 17NENE

Qtrqr: NENE Sec: 17 Twp: 1S Range: 67W Meridian: 6

Latitude: 39.969559 Longitude: -104.905442

CORRECTIVE ACTIONS:

1 CA# 139972

Corrective Action: Comply with Rule 1002.f.(2) to control stormwater runoff in a manner that minimized erosion, transport of sediment offsite, and site degradation. BMPs shall be maintained until the facility is abandoned and final reclamation is achieved pursuant to Rule 1004.

Date: 07/09/2020

Response: CA COMPLETED

Date of Completion: 07/22/2020

Operator Comment: Stormwater work has been completed and will continue to monitor. CA complete.

COGCC Decision: _____

COGCC
Representative:

OPERATOR COMMENT AND SUBMITTAL

Comment: Stormwater work has been completed and will continue to monitor. 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: 9/2/2020 9:25:19 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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Total Attach: 0 Files