

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:
402463812

Date Received:
08/11/2020

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: 10453
Name of Operator: PARADOX UPSTREAM LLC
Address: 500 DALLAS ST SUITE #1650
City: HOUSTON State: TX Zip: 77002

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

Additional Operator Contact:

Contact Name	Phone	Email
Nowak, Scott		scottn@bogresources.com
Hankins, Neil	970-428-2742	davidh@paradoxresources.com
Miller, Mandy	970-739-3786	mandym@paradoxresources.com

COGCC INSPECTION SUMMARY:

FIR Document Number: 693902020
Inspection Date: 07/14/2020 FIR Submit Date: 07/21/2020 FIR Status:

Inspected Operator Information:

Company Name: PARADOX UPSTREAM LLC Company Number: 10453
Address: 500 DALLAS ST SUITE #1650
City: HOUSTON State: TX Zip: 77002

LOCATION - Location ID: 316826

Location Name: FOSSIL FEDERAL-N44N16W Number: 18SESE County: SAN MIGUEL
Qtrqtr: SESE Sec: 18 Twp: 44N Range: 16W Meridian: N
Latitude: 38.066959 Longitude: -108.669263

FACILITY - API Number: 05-113-00 Facility ID: 263297

Facility Name: FOSSIL FEDERAL Number: 2-18
Qtrqtr: SESE Sec: 18 Twp: 44N Range: 16W Meridian: N
Latitude: 38.066959 Longitude: -108.669263

CORRECTIVE ACTIONS:

1 CA# 140599

Corrective Action: -Manage and control weed debris by 8/21/2020. This is the second corrective action to control kochia at this location. Date: 08/21/2020

Response: CA COMPLETED Date of Completion: 08/05/2020

Operator Comment: Started on 7/31/2020, completed 8/5/2020. All listed correction items have been addressed.

COGCC Decision: Approved pending re-inspection

COGCC
Representative:

OPERATOR COMMENT AND SUBMITTAL

Comment: Started on 7/27/2020, completed 8/4/2020. All listed correction items have been addressed.

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

Print Name: Mandy Miller

Signed: _____

Title: Production

Date: 8/11/2020 10:13:07 AM

ATTACHMENT LIST

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

Document Number **Description**

402463812	FIR RESOLUTION SUBMITTED
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Total Attach: 1 Files