

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:

402472846

Date Received:

08/21/2020

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
<u>Hankins, Neil</u>	<u>970-428-2742</u>	<u>davidh@paradoxresources.com</u>
<u>Nowak, Scott</u>		<u>scott@bogresources.com</u>
<u>Miller, Mandy</u>	<u>970-739-3786</u>	<u>mandym@paradoxresources.com</u>

COGCC INSPECTION SUMMARY:

FIR Document Number: 693902018

Inspection Date: 07/14/2020

FIR Submit Date: 07/20/2020

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: 316837

Location Name: ANDY'S MESA FEDERAL-N44N16W Number: 28SENE County: SAN MIGUEL

Qtrqtr: SENE Sec: 28 Twp: 44N Range: 16W Meridian: N

Latitude: 38.047830 Longitude: -108.633760

FACILITY - API Number: 05-113-00 Facility ID: 269044

Facility Name: ANDY'S MESA FEDERAL Number: 37

Qtrqtr: SENE Sec: 28 Twp: 44N Range: 16W Meridian: N

Latitude: 38.047830 Longitude: -108.633760

CORRECTIVE ACTIONS:

1 ☒ CA# 140598

Corrective Action: Stormwater controls need to be installed to stabilize erosion within the southern project area.

Date: 08/20/2020

Response: CA COMPLETED

Date of Completion: 08/13/2020

Stormwater controls set and erosion stabilized.

Operator _____
Comment: _____

COGCC Decision: Approved pending re-inspection

COGCC
Representative: _____

OPERATOR COMMENT AND SUBMITTAL

Comment: Stormwater controls set and erosion stabilized.

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 TECH

Date: 8/21/2020 11:34:47 AM

ATTACHMENT LIST

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

Document Number **Description**

402472846	FIR RESOLUTION SUBMITTED
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Total Attach: 1 Files