

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:

402501561

Date Received:

10/01/2020

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: 696103636

Inspection Date: 08/28/2020

FIR Submit Date: 08/31/2020

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: 305508

Location Name: HOWARD LAKE-66N64W Number: 9NENW County: _____

Qtrqr: NENW Sec: 9 Twp: 6N Range: 64W Meridian: 6

Latitude: 40.505750 Longitude: -104.557780

FACILITY - API Number: 05-123- -00 Facility ID: 305508

Facility Name: HOWARD LAKE-66N64W Number: 9NENW

Qtrqr: NENW Sec: 9 Twp: 6N Range: 64W Meridian: 6

Latitude: 40.505750 Longitude: -104.557780

CORRECTIVE ACTIONS:

1 CA# 141597

Corrective Action: Remove, manage, & control weeds around wellsite.
Comply with Rule 603.f.
See photo #1.

Date: 09/14/2020

Response: CA COMPLETED

Date of Completion: 09/09/2020

Operator Comment: Weeds have been removed from around the wellhead. Satisfactory follow up inspection has confirmed work was completed. CA complete.

COGCC Decision: _____

COGCC
Representative:

OPERATOR COMMENT AND SUBMITTAL

Comment: Weeds have been removed from around the wellhead. Satisfactory follow up inspection has confirmed work was completed. 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: 10/1/2020 11:43:00 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