

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:
402503151

Date Received:
10/05/2020

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: 10575

Name of Operator: 8 NORTH LLC

Address: 370 17TH STREET SUITE 5300

City: DENVER State: CO Zip: 80202

Contact Name and Telephone:

Name: _____

Phone: () _____ Fax: () _____

Email: _____

Additional Operator Contact:

| Contact Name | Phone | Email |
|---------------------|---------------------|----------------------------------|
| <u>Jeff Annable</u> | <u>720-354-4590</u> | <u>jannable@extractionog.com</u> |

COGCC INSPECTION SUMMARY:

FIR Document Number: 696302461

Inspection Date: 09/11/2020

FIR Submit Date: 09/11/2020

FIR Status: _____

Inspected Operator Information:

Company Name: 8 NORTH LLC

Company Number: 10575

Address: 370 17TH STREET SUITE 5300

City: DENVER State: CO Zip: 80202

LOCATION - Location ID: 468102

Location Name: Marick 1, 7, 10-29 Tank Battery Number: _____ County: _____

Qtrqr: NWSE Sec: 29 Twp: 11N Range: 61W Meridian: 6

Latitude: 40.895610 Longitude: -104.226813

FACILITY - API Number: 05-123-00 Facility ID: 468102

Facility Name: Marick 1, 7, 10-29 Tank Battery Number: _____

Qtrqr: NWSE Sec: 29 Twp: 11N Range: 61W Meridian: 6

Latitude: 40.895610 Longitude: -104.226813

CORRECTIVE ACTIONS:

1 CA# 141839

Corrective Action: Comply with Rule 603.f.

Date: 09/25/2020

Response: CA COMPLETED

Date of Completion: 09/25/2020

Operator Comment: Weeds have been removed.

COGCC Decision: _____

COGCC
Representative:

2 CA# 141840

Corrective Action: Install or repair required BMPs per Rule 1002.f.(2)C

Date: 09/25/2020

Response: CA COMPLETED

Date of Completion: 09/25/2020

Operator
Comment:

Stormwater/erosion control BMPs have been repaired.

COGCC Decision:

COGCC
Representative:

OPERATOR COMMENT AND SUBMITTAL

Comment:

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

Print Name: Jeff Annable

Signed: _____

Title: Regulatory Analyst

Date: 10/5/2020 10:49:31 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> |
|------------------------|----------------------------|
| 402503161 | Photo Documentation 1 of 3 |
| 402503162 | Photo Documentation 2 of 3 |
| 402503163 | Photo Documentation 3 of 3 |

Total Attach: 3 Files