

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:

402503216

Date Received:

10/05/2020

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: 81480

Name of Operator: THOMAS L SPRING LLC

Address: 7400 E ORCHARD RD STE 106-S

City: GREENWOOD VILLAGE State: CO Zip: 80111

Contact Name and Telephone:

Name: \_\_\_\_\_

Phone: ( ) \_\_\_\_\_ Fax: ( ) \_\_\_\_\_

Email: \_\_\_\_\_

Additional Operator Contact:

Contact Name Phone

SPRING THOMAS

SPRING KATE

Email

t1spring@aol.com

kathleenspring3@gmail.com

COGCC INSPECTION SUMMARY:

FIR Document Number: 690200686

Inspection Date: 09/24/2020

FIR Submit Date: 09/28/2020

FIR Status: \_\_\_\_\_

Inspected Operator Information:

Company Name: THOMAS L SPRING LLC

Company Number: 81480

Address: 7400 E ORCHARD RD STE 106-S

City: GREENWOOD VILLAGE State: CO Zip: 80111

LOCATION - Location ID: 324873

Location Name: WARNE TEMPLIN-620S48W Number: 29SESE County: KIOWA

Qtrqr: SESE Sec: 29 Twp: 20S Range: 48W Meridian: 6

Latitude: 38.284840 Longitude: -102.807150

FACILITY - API Number: 05-061- -00 Facility ID: 213351

Facility Name: WARNE TEMPLIN Number: 1-29

Qtrqr: SESE Sec: 29 Twp: 20S Range: 48W Meridian: 6

Latitude: 38.284840 Longitude: -102.807150

CORRECTIVE ACTIONS:

1 CA# 142388

Corrective Action: Comply with 1004 Rules.

Date: 12/13/2020

Response: CA COMPLETED

Date of Completion: 10/05/2020

Operator Comment: The equipment has been removed from the location. We are still working on decompacting the location and reseeded. We will submit a new FIRR Corrective Action Response when location work has been completed.

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: Kathleen Spring

Signed: \_\_\_\_\_

Title: Manager

Date: 10/5/2020 11:07:05 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