

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:
402518698

Date Received:
10/26/2020

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: 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: 679603363

Inspection Date: 09/30/2020

FIR Submit Date: 09/30/2020

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: 322621

Location Name: KETTLER-65N66W Number: 18SWNW County: _____

Qtrqr: SWN Sec: 18 Twp: 5N Range: 66W Meridian: 6

Latitude: 40.401164 Longitude: -104.830023

FACILITY - API Number: 05-123-00 Facility ID: 322621

Facility Name: KETTLER-65N66W Number: 18SWNW

Qtrqr: SWN Sec: 18 Twp: 5N Range: 66W Meridian: 6

Latitude: 40.401164 Longitude: -104.830023

CORRECTIVE ACTIONS:

1 CA# 142439

Corrective Action: Repair or install berms or other secondary containment devices per Rule 605.a.(4).

Date: 09/21/2020

Response: CA COMPLETED

Date of Completion: 10/21/2020

Operator Comment: Berms have been repaired. CA complete.

COGCC Decision: _____

COGCC
Representative:

2 CA# 142440

Corrective Action: Comply with Rule 603.f.

Date: 09/21/2020

Response: CA COMPLETED

Date of Completion: 10/21/2020

Operator
Comment: Weeds have been removed. CA complete.

COGCC Decision:

COGCC
Representative:

OPERATOR COMMENT AND SUBMITTAL

Comment: Berms have been repaired. Weeds have been removed. CA's 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: 10/26/2020 3:06:10 PM

ATTACHMENT LIST

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

Document Number **Description**

| <u>Document Number</u> | <u>Description</u> |
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Total Attach: 0 Files