

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:
402536313

Date Received:
11/19/2020

FIR RESOLUTION FORM

Overall Status: CAC

CA Summary:

3 of 4 CAs from the FIR responded to on this Form

3 CA Completed
0 Factual Review Request

OPERATOR INFORMATION

OGCC Operator Number: 10661

Name of Operator: BISON OIL & GAS II LLC

Address: 518 17TH STREET #1800

City: DENVER State: CO Zip: 80202

Contact Name and Telephone:

Name: _____

Phone: () _____ Fax: () _____

Email: _____

Additional Operator Contact:

Contact Name	Phone	Email
<u>Ariana Solis</u>	<u>7206446997</u>	<u>asolis@bisonog.com</u>
<u>Nica Hoshijo</u>	<u>7206446997</u>	<u>nhoshijo@bisonog.com</u>

COGCC INSPECTION SUMMARY:

FIR Document Number: 696302654

Inspection Date: 11/12/2020

FIR Submit Date: 11/12/2020

FIR Status: _____

Inspected Operator Information:

Company Name: BISON OIL & GAS II LLC

Company Number: 10661

Address: 518 17TH STREET #1800

City: DENVER State: CO Zip: 80202

LOCATION - Location ID: 452871

Location Name: Castor 8-59 Number: 19 County: _____

Qtrqtr: NESE Sec: 19 Twp: 8N Range: 59W Meridian: 6

Latitude: 40.644946 Longitude: -104.011983

FACILITY - API Number: 05-123-00 Facility ID: 452871

Facility Name: Castor 8-59 Number: 19

Qtrqtr: NESE Sec: 19 Twp: 8N Range: 59W Meridian: 6

Latitude: 40.644946 Longitude: -104.011983

CORRECTIVE ACTIONS:

1 CA# 144340

Corrective Action: For localized stained soils or oily waste - "Properly dispose of oily waste in accordance with 907.e."

Date: 11/27/2020

Response: CA COMPLETED

Date of Completion: 11/19/2020

Operator Comment: Oily waste removed/soil treated with bioremediation product

COGCC Decision: _____

COGCC
Representative:

3 CA# 144342

Corrective Action:

Date: 11/27/2020

Response: CA COMPLETED

Date of Completion: 11/19/2020

Operator
Comment:

COGCC Decision: _____

COGCC
Representative:

4 CA# 144343

Corrective Action:

Date: 11/27/2020

Response: CA COMPLETED

Date of Completion: 11/19/2020

Operator
Comment:

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: Ariana Solis

Signed: _____

Title: Regulatory Analyst

Date: 11/19/2020 1:40:40 PM

ATTACHMENT LIST

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

Document Number **Description**

402536346	Compliance photos
-----------	-------------------

Total Attach: 1 Files