

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:
402549243

Date Received:
12/08/2020

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: 10112

Name of Operator: FOUNDATION ENERGY MANAGEMENT LLC

Address: 5057 KELLER SPRINGS RD STE 650

City: ADDISON State: TX Zip: 75001

Contact Name and Telephone:

Name: _____

Phone: () _____ Fax: () _____

Email: _____

Additional Operator Contact:

Contact Name

Phone

Email

Energy, Foundation

regulatory@foundationenergy.com

Thompson, Bud

BLThomps@BLM.gov

COGCC INSPECTION SUMMARY:

FIR Document Number: 700404388

Inspection Date: 12/02/2020

FIR Submit Date: 12/03/2020

FIR Status: _____

Inspected Operator Information:

Company Name: FOUNDATION ENERGY MANAGEMENT LLC

Company Number: 10112

Address: 5057 KELLER SPRINGS RD STE 650

City: ADDISON State: TX Zip: 75001

LOCATION - Location ID: 315473

Location Name: RANGLEY SOUTH FED-61S102W Number: 1NWNW County: RIO BLANCO

Qtrqtr: NWN Sec: 1 Twp: 1S Range: 102W Meridian: 6
W

Latitude: 40.003380 Longitude: -108.796850

FACILITY - API Number: 05-103-

-00

Facility ID: 230888

Facility Name: RANGLEY SOUTH FED Number: 13-1-1-102

Qtrqtr: NWN Sec: 1 Twp: 1S Range: 102W Meridian: 6
W

Latitude: 40.003380 Longitude: -108.796850

CORRECTIVE ACTIONS:

1 CA# 144822

Corrective Action: Install sign to comply with Rule 210.e.

Date: 10/15/2020

Response: CA COMPLETED

Date of Completion: 12/08/2020

Operator
Comment:

Updated sign has been installed. See attached photo.

COGCC Decision: _____

COGCC
Representative:

2 CA# 144823

Corrective Action: Install sign to comply with Rule 210.b.

Date: 10/15/2020

Response: CA COMPLETED

Date of Completion: 12/08/2020

Operator
Comment:

Updated sign has been installed. See attached photo.

COGCC Decision: _____

COGCC
Representative:

OPERATOR COMMENT AND SUBMITTAL

Comment: Corrective actions have been completed.

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

Print Name: Afton Iiams

Signed: _____

Title: HSE/Regulatory Technician

Date: 12/8/2020 3:13:06 PM

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>
------------------------	--------------------

402549246	Location Photo
-----------	----------------

Total Attach: 1 Files