

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:
402567646

Date Received:
01/08/2021

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: 44390

Name of Operator: JAVERNICK OIL

Address: 3040 E MAIN

City: CANON CITY State: CO Zip: 81212

Contact Name and Telephone:

Name: _____

Phone: () _____ Fax: () _____

Email: _____

Additional Operator Contact:

Contact Name

Phone

Email

Jim Javernick

719-671-3787

javernick1@gmail.com

COGCC INSPECTION SUMMARY:

FIR Document Number: 700600205

Inspection Date: 11/17/2020

FIR Submit Date: 11/23/2020

FIR Status: _____

Inspected Operator Information:

Company Name: JAVERNICK OIL

Company Number: 44390

Address: 3040 E MAIN

City: CANON CITY State: CO Zip: 81212

LOCATION - Location ID: 424805

Location Name: Aurora/Coho Number: 24-21 County: FREMONT

Qtrqr: SESW Sec: 21 Twp: 19S Range: 69W Meridian: 6

Latitude: 38.376149 Longitude: -105.117387

FACILITY - API Number: 05-043-00 Facility ID: 424812

Facility Name: AURORA Number: 24-21

Qtrqr: SESW Sec: 21 Twp: 19S Range: 69W Meridian: 6

Latitude: 38.376149 Longitude: -105.117387

CORRECTIVE ACTIONS:

1 CA# 144556

Corrective Action: Immediately cease venting/flaring. Submit FIRR to inspector documenting corrective action.

Date: 11/18/2020

Response: CA COMPLETED

Date of Completion: 11/18/2020

Operator Comment: Operator was contacted by Jason Kosola, COGCC Inspector on 11/17/20 about gas venting from wellhead and advised to correct issue. Operator immediately sent out a crew to close a valve that had been left in the "open" position and also installed a 1/4" bolt in the opening of the upper bull plug. No further venting was allowed. See image attachment in ATTACHMENTS.

COGCC Decision: Approved

COGCC
Representative:

2 CA# 144557

Corrective Action:

Date: 12/18/2020

Response: CA COMPLETED

Date of Completion: 11/24/2020

Operator Comment:

COGCC Decision: Approved

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: Liz Harkins

Signed: _____

Title: Agent

Date: 1/8/2021 7:46:26 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>
402567646	FIR RESOLUTION SUBMITTED
402569714	wellhead isolation
402569731	signage correction of emergency contact number

Total Attach: 3 Files