

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:
402571592

Date Received:
01/11/2021

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: 10672
Name of Operator: TIMBER CREEK OPERATING LLC
Address: 6295 GREENWOOD PLAZA BLVD #100
City: GREENWOOD VILLAGE State: CO Zip: 8111-4978

Contact Name and Telephone:
Name: _____
Phone: () _____ Fax: () _____
Email: _____

Additional Operator Contact:

Contact Name	Phone	Email
<u>Beardslee, Tom</u>		<u>tom.beardslee@state.co.us</u>
<u>Fitzgerald, Edie</u>	<u>719-859-1394</u>	<u>efitzgerald@ogrisop.com</u>
<u>Mack, Ronald</u>	<u>719-859-4896</u>	<u>rmack@ogrisop.com</u>
<u>Santistevan, Vince</u>	<u>719-845-2102/719-680-9705</u>	<u>vincasantistevan@tcenergyllc.com</u>

COGCC INSPECTION SUMMARY:

FIR Document Number: 693503481
Inspection Date: 09/14/2020 FIR Submit Date: 09/14/2020 FIR Status: _____

Inspected Operator Information:

Company Name: TIMBER CREEK OPERATING LLC Company Number: 10672
Address: 6295 GREENWOOD PLAZA BLVD #100
City: GREENWOOD VILLAGE State: CO Zip: 8111-4978

LOCATION - Location ID: 308931

Location Name: APACHE CANYON-634S68W Number: 13NENE County: LAS ANIMAS
Qtrqr: NENE Sec: 13 Twp: 34S Range: 68W Meridian: 6
Latitude: 37.091194 Longitude: -104.937889

FACILITY - API Number: 05-071-00 Facility ID: 285177

Facility Name: APACHE CANYON Number: 13-1
Qtrqr: NENE Sec: 13 Twp: 34S Range: 68W Meridian: 6
Latitude: 37.091194 Longitude: -104.937889

CORRECTIVE ACTIONS:

1 CA# 142091

Corrective Action: Non E&P Waste not properly stored, handled, transported, treated, or disposed per Rule 907A

Date: _____

Response: CA COMPLETED

Date of Completion: 01/06/2021

Operator Comment: THE IMPACTED SOIL NEAR THE LIQUID RING COMPRESSOR WAS REMOVED AND PROPERLY DISPOSED IN ACCORDANCE WITH THE OGRIS OPERATING WASTE MANAGEMENT PLAN. SEE ATTACHED PHOTO LOG FOR DETAILS.

COGCC Decision: _____

COGCC Representative: _____

OPERATOR COMMENT AND SUBMITTAL

Comment: ALL CORRECTIVE ACTIONS HAVE BEEN ADDRESSED.

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

Print Name: Edie Fitzgerald

Signed: _____

Title: Sr. Environmental Tech.

Date: 1/11/2021 12:07:08 PM

ATTACHMENT LIST

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

Document Number Description

402571599	PHOTO LOG
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Total Attach: 1 Files