

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:
402630807

Date Received:
03/17/2021

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: 10539
Name of Operator: UTAH GAS OP LTD DBA UTAH GAS CORP
Address: 1125 ESCALANTE DR
City: RANGELY State: CO Zip: 81648
Contact Name and Telephone:
Name: _____
Phone: () _____ Fax: () _____
Email: _____

Additional Operator Contact:

Contact Name	Phone	Email
<u>Utah Gas Corp</u>	<u>720-425-0303</u>	<u>inspections@utahgascorp.com</u>
<u>Thompson, Bud</u>		<u>BLThomps@BLM.gov</u>

COGCC INSPECTION SUMMARY:

FIR Document Number: 700405492
Inspection Date: 02/22/2021 FIR Submit Date: 02/23/2021 FIR Status: _____

Inspected Operator Information:

Company Name: UTAH GAS OP LTD DBA UTAH GAS CORP Company Number: 10539
Address: 1125 ESCALANTE DR
City: RANGELY State: CO Zip: 81648

LOCATION - Location ID: 316099

Location Name: LOWER HORSE DRAW UNIT-62S103W Number: 15SWNW County: RIO BLANCO
Qtrqtr: SWN Sec: 15 Twp: 2S Range: 103W Meridian: 6
Latitude: 39.874418 Longitude: -108.948887

FACILITY - API Number: 05-103- -00 Facility ID: 232112

Facility Name: LOWER HORSE DRAW UNIT Number: 2128
Qtrqtr: SWN Sec: 15 Twp: 2S Range: 103W Meridian: 6
Latitude: 39.874418 Longitude: -108.948887

CORRECTIVE ACTIONS:

1 CA# 146796

Corrective Action: Install or repair required BMP's.

Date: 03/25/2021

Response: CA COMPLETED

Date of Completion: 03/12/2021

Temporary tank was removed

Operator _____
Comment: _____

COGCC Decision: _____

COGCC Representative: _____

2 CA# 146797

Corrective Action: Place label on tank. Date: 04/25/2021

Response: CA COMPLETED Date of Completion: 03/12/2021

Operator Comment: Temporary tank was removed

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: Chantae Pennell Signed: _____

Title: Regulatory Technician Date: 3/17/2021 6:50:30 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>
402630808	CA Completed

Total Attach: 1 Files