

State of Colorado  
Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203  
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Document Number:  
401888292

Date Received:  
12/28/2018

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: 10330  
Name of Operator: INVESTMENT EQUIPMENT LLC  
Address: 412 W PLATTE AVE  
City: FT MORGAN State: CO Zip: 80701

Contact Name and Telephone:  
Name: \_\_\_\_\_  
Phone: ( ) \_\_\_\_\_ Fax: ( ) \_\_\_\_\_  
Email: \_\_\_\_\_

Additional Operator Contact:

Contact Name	Phone	Email
<u>Jim Chisholm</u>	<u>405-642-9437</u>	<u>investmentequipment@gmail.com</u>

COGCC INSPECTION SUMMARY:

FIR Document Number: 692600972  
Inspection Date: 12/18/2018 FIR Submit Date: 12/19/2018 FIR Status: \_\_\_\_\_

Inspected Operator Information:

Company Name: INVESTMENT EQUIPMENT LLC Company Number: 10330  
Address: 412 W PLATTE AVE  
City: FT MORGAN State: CO Zip: 80701

LOCATION - Location ID: 321150

Location Name: HARPER-633S43W Number: 20CSW County: BACA  
Qtrqtr: CSW Sec: 20 Twp: 33S Range: 43W Meridian: 6  
Latitude: 37.153060 Longitude: -102.290418

FACILITY - API Number: 05-009-00 Facility ID: 206157

Facility Name: HARPER Number: 1-20  
Qtrqtr: CSW Sec: 20 Twp: 33S Range: 43W Meridian: 6  
Latitude: 37.153060 Longitude: -102.290418

CORRECTIVE ACTIONS:

1  CA# 121168

Corrective Action: Remove equipment from location and begin final reclamation Date: 01/18/2019

Response: CA COMPLETED Date of Completion: 12/27/2018

Operator Comment: Removed equipment and debris from location and prepared for reclamation.

COGCC Decision: Approved

COGCC  
Representative:

2  CA# 121169

Corrective Action: Remove unused tubing from location and begin final reclamation

Date: \_\_\_\_\_

Response: CA COMPLETED

Date of Completion: 12/28/2018

Operator  
Comment: Removed tubing and wellhead equipment from location and prepared location for reclamation.

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: Jim Chisholm

Signed: \_\_\_\_\_

Title: Mgr Member

Date: 12/28/2018 1:39:28 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>
401888292	FIR RESOLUTION SUBMITTED

Total Attach: 1 Files