

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:

402642273

Date Received:

03/29/2021

FIR RESOLUTION FORM

Overall Status: CAC

CA Summary:

1 of 2 CAs from the FIR responded to on this Form

1 CA Completed
0 Factual Review Request

OPERATOR INFORMATION

OGCC Operator Number: 10459

Name of Operator: EXTRACTION OIL & GAS INC

Address: 370 17TH STREET SUITE 5200

City: DENVER State: CO Zip: 80202

Contact Name and Telephone:

Name: _____

Phone: () _____ Fax: () _____

Email: _____

Additional Operator Contact:

Contact Name

Phone

Email

Nathan Bennett COGCCInspections@extractionog.com

nbennett@extractionog.com

COGCC INSPECTION SUMMARY:

FIR Document Number: 696303026

Inspection Date: 03/12/2021

FIR Submit Date: 03/12/2021

FIR Status: _____

Inspected Operator Information:

Company Name: EXTRACTION OIL & GAS INC

Company Number: 10459

Address: 370 17TH STREET SUITE 5200

City: DENVER State: CO Zip: 80202

LOCATION - Location ID: 448675

Location Name: DF Ranch PC NI Battery Number: _____ County: _____
Location

Qtrqr: NESE Sec: 9 Twp: 11N Range: 61W Meridian: 6

Latitude: 40.935866 Longitude: -104.203914

FACILITY - API Number: 05-123- -00 Facility ID: 448675

Facility Name: DF Ranch PC NI Battery Number: _____
Location

Qtrqr: NESE Sec: 9 Twp: 11N Range: 61W Meridian: 6

Latitude: 40.935866 Longitude: -104.203914

CORRECTIVE ACTIONS:

1 CA# 147383

Corrective Action: Install sign to comply with Rule 605.h.

Date: 04/16/2021

Response: CA COMPLETED

Date of Completion: 03/25/2021

Operator Comment: Tanks were labeled. Photo log of labeled tank(s) is attached.

NOTE - weeds will be removed once the snow drifts on location have melted.

COGCC Decision: _____

COGCC
Representative:

OPERATOR COMMENT AND SUBMITTAL

Comment: Tanks have been appropriately labeled. Snowpack prevents removal of weeds at this time. Removal will be completed as soon as ground conditions allow.

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

Print Name: Nathan Bennett

Signed: _____

Title: Regulatory Manager

Date: 3/29/2021 1:16:50 PM

ATTACHMENT LIST

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

Document Number **Description**

402642321	Photo Log
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Total Attach: 1 Files