

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:

402744407

Date Received:

07/12/2021

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: 10112

Name of Operator: FOUNDATION ENERGY MANAGEMENT LLC

Address: 5057 KELLER SPRINGS RD STE 650

City: ADDISON State: TX Zip: 75001

Contact Name and Telephone:

Name: _____

Phone: () _____ Fax: () _____

Email: _____

Additional Operator Contact:

Contact Name

Phone

Email

Contact, General

regulatory@foundationenergy.com

COGCC INSPECTION SUMMARY:

FIR Document Number: 696202845

Inspection Date: 06/21/2021

FIR Submit Date: 06/22/2021

FIR Status: _____

Inspected Operator Information:

Company Name: FOUNDATION ENERGY MANAGEMENT LLC

Company Number: 10112

Address: 5057 KELLER SPRINGS RD STE 650

City: ADDISON State: TX Zip: 75001

LOCATION - Location ID: 322339

Location Name: GOVERNMENT-66S104W Number: 34NENE County: _____

Qtrqr: NENE Sec: 34 Twp: 6S Range: 104W Meridian: 6

Latitude: 39.499473 Longitude: -108.967543

FACILITY - API Number: 05-045- -00 Facility ID: 322339

Facility Name: GOVERNMENT-66S104W Number: 34NENE

Qtrqr: NENE Sec: 34 Twp: 6S Range: 104W Meridian: 6

Latitude: 39.499473 Longitude: -108.967543

CORRECTIVE ACTIONS:

1 CA# 152072

Corrective Action: Comply with Rule 606

Date: 06/29/2021

Response: CA COMPLETED

Date of Completion: 06/29/2021

Operator Comment: Corrective action is completed, see attached photos.

COGCC Decision: _____

COGCC
Representative:

2 CA# 152073

Corrective Action: Install proper guy line markers per Rule 1003.a

Date: 07/06/2021

Response: CA COMPLETED

Date of Completion: 07/02/2021

Operator
Comment: Corrective action is completed, see attached photo.

COGCC Decision:

COGCC
Representative:

OPERATOR COMMENT AND SUBMITTAL

Comment: Corrective actions have been completed.

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

Print Name: Afton Iiams

Signed:

Title: HSE/Regulatory Technician

Date: 7/12/2021 11:51:12 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>
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402744424	Location Photos
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Total Attach: 1 Files