

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:  
402789639

Date Received:  
08/24/2021

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: 95960

Name of Operator: WEXPRO COMPANY

Address: P O BOX 45003

City: SALT LAKE CITY State: UT Zip: 84145-0601

Contact Name and Telephone:

Name: \_\_\_\_\_

Phone: ( ) \_\_\_\_\_ Fax: ( ) \_\_\_\_\_

Email: \_\_\_\_\_

Additional Operator Contact:

Contact Name

Phone

Email

April Stegall

307-352-7561

april.stegall@dominionenergy.com

COGCC INSPECTION SUMMARY:

FIR Document Number: 689806195

Inspection Date: 08/03/2021

FIR Submit Date: 08/18/2021

FIR Status: \_\_\_\_\_

Inspected Operator Information:

Company Name: WEXPRO COMPANY

Company Number: 95960

Address: P O BOX 45003

City: SALT LAKE CITY State: UT Zip: 84145-0601

LOCATION - Location ID: 313177

Location Name: LASHER-612N101W Number: 25NWSW County: MOFFAT

Qtrqr: NWS Sec: 25 Twp: 12N Range: 101W Meridian: 6  
W

Latitude: 40.968065 Longitude: -108.702839

FACILITY - API Number: 05-081-00 Facility ID: 269093

Facility Name: LASHER Number: NO.8

Qtrqr: NWS Sec: 25 Twp: 12N Range: 101W Meridian: 6  
W

Latitude: 40.968065 Longitude: -108.702839

CORRECTIVE ACTIONS:

1 CA# 154959

Corrective Action: Comply with Rule 606.

Date: 08/25/2021

Response: CA COMPLETED

Date of Completion: 08/24/2021

Operator Comment: A non-selective was applied to the equipment area on 6/16/2021. A selective herbicide was applied to the interim reclamation area of the well pad on 8/24/2021. PUR's will be submitted by Wexpro Company's contractor.

COGCC Decision: \_\_\_\_\_

COGCC  
Representative:

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**OPERATOR COMMENT AND SUBMITTAL**

Comment: A non-selective was applied to the equipment area on 6/16/2021. A selective herbicide was applied to the interim reclamation area of the well pad on 8/24/2021. PUR's will be submitted by Wexpro Company's contractor.

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

Print Name: April Stegall

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

Title: Reclamation Agent

Date: 8/24/2021 9:23:03 AM

**ATTACHMENT LIST**

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

**Document Number**      **Description**

<b><u>Document Number</u></b>	<b><u>Description</u></b>

Total Attach: 0 Files