

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:
402793713

Date Received:
08/26/2021

FIR RESOLUTION FORM

Overall Status: CAC

CA Summary:

1 of 6 CAs from the FIR responded to on this Form

1 CA Completed
0 Factual Review Request

OPERATOR INFORMATION

OGCC Operator Number: 46290
Name of Operator: KP KAUFFMAN COMPANY INC
Address: 1675 BROADWAY, STE 2800
City: DENVER State: CO Zip: 80202

Contact Name and Telephone:
Name: _____
Phone: () _____ Fax: () _____
Email: _____

Additional Operator Contact:

Contact Name	Phone	Email
<u>Axelson, John</u>		<u>john.axelson@state.co.us</u>
<u>Canfield, Chris</u>		<u>chris.canfield@state.co.us</u>
<u>.KPK</u>		<u>cogcc@kpk.com</u>
<u>Knop, Max</u>	<u>303-825-4822</u>	<u>MKnop@kpk.com</u>
<u>Pesicka, Conor</u>		<u>conor.pesicka@state.co.us</u>

COGCC INSPECTION SUMMARY:

FIR Document Number: 691201525
Inspection Date: 08/23/2021 FIR Submit Date: 08/26/2021 FIR Status: _____

Inspected Operator Information:

Company Name: KP KAUFFMAN COMPANY INC Company Number: 46290
Address: 1675 BROADWAY, STE 2800
City: DENVER State: CO Zip: 80202

LOCATION - Location ID: _____

Location Name: _____ Number: _____ County: _____
Qtrqr: NESW Sec: 1 Twp: 1N Range: 68W Meridian: 6
Latitude: 40.080399 Longitude: -104.956453

FACILITY - API Number: 05-123-00 Facility ID: 474780

Facility Name: Cosslett #3 Number: _____
Qtrqr: NESW Sec: 1 Twp: 1N Range: 68W Meridian: 6
Latitude: 40.080399 Longitude: -104.956453

CORRECTIVE ACTIONS:

2 CA# 155210

Corrective Action: Per COA on Form 27 Document #402444755: Submit Form 19 Supplemental Report for the purpose of requesting closure of Spill/Release 474780 as work will proceed under this Form 27.

Date: 06/09/2020

Response: CA COMPLETED

Date of Completion: 08/26/2021

Operator Comment: Form 19 Supplemental (Doc #402793681) submitted requesting closure with work proceeding un REM 15825. Volume of release was updated as ordered.

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: Max Knop

Signed: _____

Title: Gen Mangr of Air Quality

Date: 8/26/2021 2:38:24 PM

ATTACHMENT LIST

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

Document Number **Description**

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

Total Attach: 0 Files