

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:  
402820458

Date Received:  
09/23/2021

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: 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
.		<a href="mailto:dnr_cogccengineering@state.co.us">dnr_cogccengineering@state.co.us</a>
<a href="#">Contact, General</a>		<a href="mailto:regulatory@foundationenergy.com">regulatory@foundationenergy.com</a>

COGCC INSPECTION SUMMARY:

FIR Document Number: 689500624  
Inspection Date: 02/26/2018 FIR Submit Date: 03/02/2018 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: 316391

Location Name: COLUMBINE SP FED-64S104W Number: 13SESW County: RIO BLANCO  
Qtrqtr: SESW Sec: 13 Twp: 4S Range: 104W Meridian: 6  
Latitude: 39.705670 Longitude: -109.024050

FACILITY - API Number: 05-103- -00 Facility ID: 272001

Facility Name: COLUMBINE SP FED Number: 3C-13-4-104  
Qtrqtr: SESW Sec: 13 Twp: 4S Range: 104W Meridian: 6  
Latitude: 39.705670 Longitude: -109.024050

CORRECTIVE ACTIONS:

1  CA# 114654

Corrective Action: Contact [dnr\\_cogccengineering@state.co.us](mailto:dnr_cogccengineering@state.co.us) with resolution plan. Date: 01/20/2018

Response: CA COMPLETED Date of Completion: 09/28/2018

Operator Comment: MIT conducted 9/28/18; Form 21 Doc #401789527.

COGCC Decision: Approved pending re-inspection

COGCC  
Representative:

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**OPERATOR COMMENT AND SUBMITTAL**

Comment: Corrective action completed.

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

Print Name: Afton liams

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

Title: HSE/Regulatory Technician

Date: 9/23/2021 9:17:37 AM

**ATTACHMENT LIST**

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

**Document Number**      **Description**

402820458	FIR RESOLUTION SUBMITTED
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Total Attach: 1 Files