

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:
402822758

Date Received:
09/27/2021

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
<u>Allred, Josh</u>	<u>970-629-5914</u>	<u>jallred@foundationenergy.com</u>
<u>Ikenouye, Teri</u>		<u>COGCC_Engineering@state.co.us</u>
<u>Contact, General</u>		<u>teri.ikenouye@state.co.us</u>
		<u>regulatory@foundationenergy.com</u>

COGCC INSPECTION SUMMARY:

FIR Document Number: 675103345
Inspection Date: 02/16/2017 FIR Submit Date: 02/22/2017 FIR Status: _____

Inspected Operator Information:

Company Name: FOUNDATION ENERGY MANAGEMENT LLC Company Number: 10112
Address: 16000 DALLAS PARKWAY #875
City: DALLAS State: TX Zip: 75248-6607

LOCATION - Location ID: 315493

Location Name: ARCO FED-64S103W Number: 22SWSW County: RIO BLANCO
Qtrqr: SWS Sec: 22 Twp: 4S Range: 103W Meridian: 6
W
Latitude: 39.691140 Longitude: -108.947750

FACILITY - API Number: 05-103-00 Facility ID: 230927

Facility Name: ARCO FED Number: 4-22-4-103
Qtrqr: SWS Sec: 22 Twp: 4S Range: 103W Meridian: 6
W
Latitude: 39.691140 Longitude: -108.947750

CORRECTIVE ACTIONS:

1 CA# 64898

Corrective Action: Report production via Form 7 as required by Rule 206 or Contact COGCC_Engineering@state.co.us with resolution plan.

Date: 03/04/2017

Response: CA COMPLETED

Date of Completion: 07/11/2019

Operator Comment: MIT was conducted 7/11/19; Form 21 Doc #402127880.

COGCC Decision: Approved pending re-inspection

COGCC Representative:

OPERATOR COMMENT AND SUBMITTAL

Comment: Corrective action 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: 9/27/2021 7:28:39 AM

ATTACHMENT LIST

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

Document Number **Description**

402822758	FIR RESOLUTION SUBMITTED
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Total Attach: 1 Files