

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:

402820389

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

Browning, Chuck

970-433-4139

chuck.browning@state.co.us

Labowskie, Steve

steve.labowskie@state.co.us

Pesicka, Conor

conor.pesicka@state.co.us

Contact, General

regulatory@foundationenergy.com

dnr_cogccengineering@state.co.us

COGCC INSPECTION SUMMARY:

FIR Document Number: 680403941

Inspection Date: 10/17/2018

FIR Submit Date: 10/18/2018

FIR Status: _____

Inspected Operator Information:

Company Name: FOUNDATION ENERGY MANAGEMENT LLC

Company Number: 10112

Address: 1801 BROADWAY SUITE 1500

City: DENVER State: CO Zip: 80202

LOCATION - Location ID: 322373

Location Name: FEDERAL-67S104W Number: 22SENE County: GARFIELD

Qtrqr: SENE Sec: 22 Twp: 7S Range: 104W Meridian: 6

Latitude: 39.439779 Longitude: -108.967247

FACILITY - API Number: 05-045- -00 Facility ID: 210381

Facility Name: FEDERAL Number: 22-8

Qtrqr: SENE Sec: 22 Twp: 7S Range: 104W Meridian: 6

Latitude: 39.439779 Longitude: -108.967247

CORRECTIVE ACTIONS:

1 ☒ CA# 119615

Corrective Action: Contact dnr_cogccengineering@state.co.us with resolution plan.

Date: 11/01/2018

Response: CA COMPLETED

Date of Completion: 11/21/2018

Operator Comment: MIT was conducted 11/21/18; Form 21 Doc #401850942.

COGCC Decision: Approved

COGCC Representative: Reinspected 11/21/2018 insp Doc#680404045. MIT performed 11/21/2018 Form 21 Doc#401850942. CA completed.

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: 9/23/2021 8:50:47 AM

ATTACHMENT LIST

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

Document Number **Description**

402820389	FIR RESOLUTION SUBMITTED
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Total Attach: 1 Files