

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:

402876877

Date Received:

11/19/2021

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: 96340

Name of Operator: WIEPKING-FULLERTON ENERGY LLC

Address: 106 GLENMOOR LN

City: ENGLEWOOD State: CO Zip: 80113

Contact Name and Telephone:

Name: _____

Phone: () _____ Fax: () _____

Email: _____

Additional Operator Contact:

Contact Name	Phone	Email
<u>Shalberg, Greg</u>	<u>(719) 688-3547</u>	<u>gregshalberg@aol.com</u>
<u>Boone, Linda</u>	<u>(720) 271-8605</u>	<u>LDBoonePar@aol.com</u>
<u>Halde, Kerry</u>	<u>(719) 340-0329</u>	<u>haldeoil@hotmail.com</u>

COGCC INSPECTION SUMMARY:

FIR Document Number: 688311403

Inspection Date: 10/25/2021

FIR Submit Date: 10/27/2021

FIR Status: _____

Inspected Operator Information:

Company Name: WIEPKING-FULLERTON ENERGY LLC

Company Number: 96340

Address: 106 GLENMOOR LN

City: ENGLEWOOD State: CO Zip: 80113

LOCATION - Location ID: 309645

Location Name: FORRISTAL RANCH STATE-610S55W Number: 30NENW County: LINCOLN

Qtrqr: NENW Sec: 30 Twp: 10S Range: 55W Meridian: 6

Latitude: 39.155090 Longitude: -103.596310

FACILITY - API Number: 05-073- -00 Facility ID: 297880

Facility Name: FORRISTAL RANCH STATE Number: 21-30 #5

Qtrqr: NENW Sec: 30 Twp: 10S Range: 55W Meridian: 6

Latitude: 39.155090 Longitude: -103.596310

CORRECTIVE ACTIONS:

1 ☒ CA# 157208

Corrective Action: Securely fasten all valves, pipes, fittings, and Production Facilities to ensure good mechanical condition, inspect at regular intervals and maintain in good mechanical condition per Rule 608.e.

Date: 11/29/2021

Response: CA COMPLETED

Date of Completion: 11/03/2021

Operator Comment:	Valve repaired
COGCC Decision:	Approved pending re-inspection
COGCC Representative:	Will re-inspect 12/1/2021.

<u>OPERATOR COMMENT AND SUBMITTAL</u>	
Comment:	
I hereby certify that the statements made in this form are, to the best of my knowledge, true, correct, and complete.	
Print Name: Linda Boone	Signed: _____
Title: Agent	Date: 11/19/2021 5:59:28 PM

ATTACHMENT LIST

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

<u>Document Number</u>	<u>Description</u>
402876877	FIR RESOLUTION SUBMITTED

Total Attach: 1 Files