

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:  
402880640

Date Received:  
11/28/2021

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

Shalberg, Greg

(719) 688-3547

gregshalberg@aol.com

Boone, Linda

(720) 271-8605

LDBoonePar@aol.com

Halde, Kerry

(719) 340-0329

haldeoil@hotmail.com

COGCC INSPECTION SUMMARY:

FIR Document Number: 688311406

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: 413096

Location Name: Aloha Mula Number: 4 County: LINCOLN

Qtrqr: SWS Sec: 19 Twp: 10S Range: 55W Meridian: 6

Latitude: 39.158770 Longitude: -103.600700

FACILITY - API Number: 05-073- -00 Facility ID: 413099

Facility Name: Aloha Mula Number: 4

Qtrqr: SWS Sec: 19 Twp: 10S Range: 55W Meridian: 6

Latitude: 39.158770 Longitude: -103.600700

CORRECTIVE ACTIONS:

1 ☒ CA# 157209

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: Wellhead cleaned, stained soil removed.

COGCC Decision: Approved pending re-inspection

COGCC Representative: Will re-inspect on 12/1/2021.

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: Linda Boone

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

Title: Agent

Date: 11/28/2021 5:25:25 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>
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402880640	FIR RESOLUTION SUBMITTED
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Total Attach: 1 Files