

State of Colorado
Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203
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Document Number:
402943276

Date Received:
02/01/2022

FIR RESOLUTION FORM

Overall Status:

CA Summary:

2 of 2 CAs from the FIR responded to on this Form

2 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
Beard, Alyssa		ABeard@foundationenergy.com
Foundation Energy	(866) 767-3600	regulatory@foundationenergy.com
Shalberg, Greg	(719) 688-3547	gregshalberg@aol.com

COGCC INSPECTION SUMMARY:

FIR Document Number: 688311819
Inspection Date: 12/29/2021 FIR Submit Date: 12/30/2021 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: 387162

Location Name: STEGAS 34-15 Number: 2 County: LINCOLN
Qtrqtr: SWSE Sec: 15 Twp: 11S Range: 53W Meridian: 6
Latitude: 39.083590 Longitude: -103.318630

FACILITY - API Number: 05-073-00 Facility ID: 218293

Facility Name: STEGAS 34-15 Number: 2
Qtrqtr: SWSE Sec: 15 Twp: 11S Range: 53W Meridian: 6
Latitude: 39.083590 Longitude: -103.318630

CORRECTIVE ACTIONS:

1 CA# 158989

Corrective Action: Inspect, maintain and repair tanks to comply with rule 609.b. Date: 02/01/2022

Response: CA COMPLETED Date of Completion: 01/31/2022

Operator Comment: The faulty tank at the Stegas location was removed.

COGCC Decision: _____

COGCC
Representative:

2 CA# 158990

Corrective Action: Non E&P Waste not properly stored, handled, transported, treated, or disposed per Rule 906. Require appropriate cleanup.

Date: 02/01/2022

Response: CA COMPLETED

Date of Completion: 01/31/2022

Operator
Comment:

The salt-stained soil near and beneath the faulty tank was removed and taken for disposal at Pawnee Waste.

COGCC Decision: _____

COGCC
Representative:

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: Alyssa Beard

Signed: _____

Title: EHSR Manager

Date: 2/1/2022 8:07:37 AM

ATTACHMENT LIST

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

Document Number **Description**

402943277	Photo Documentation 1/31/22
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Total Attach: 1 Files