

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:  
403002148

Date Received:  
04/01/2022

## FIR RESOLUTION FORM

### Overall Status:

#### 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: 46290

Name of Operator: KP KAUFFMAN COMPANY INC

Address: 1675 BROADWAY, STE 2800

City: DENVER State: CO Zip: 80202

Contact Name and Telephone:

Name: \_\_\_\_\_

Phone: ( ) \_\_\_\_\_ Fax: ( ) \_\_\_\_\_

Email: \_\_\_\_\_

#### Additional Operator Contact:

Contact Name

Phone

Email

Galles, Jennifer

PrimaryContractor@marcomllc.net

-

cogcc@kpk.com

Rickard, Jeff

JRickard@kpk.com

Graber, Nikki

nikki.graber@state.co.us

Schlagenhauf, Mark

mark.schlagenhauf@state.co.us

### COGCC INSPECTION SUMMARY:

FIR Document Number: 690102901

Inspection Date: 03/11/2022

FIR Submit Date: 03/17/2022

FIR Status: \_\_\_\_\_

#### Inspected Operator Information:

Company Name: KP KAUFFMAN COMPANY INC

Company Number: 46290

Address: 1675 BROADWAY, STE 2800

City: DENVER State: CO Zip: 80202

#### LOCATION - Location ID: \_\_\_\_\_

Location Name: \_\_\_\_\_ Number: \_\_\_\_\_ County: \_\_\_\_\_

Qtrqr: NESW Sec: 21 Twp: 2N Range: 68W Meridian: 6

Latitude: 40.124020 Longitude: -105.009606

FACILITY - API Number: 05-123-00 Facility ID: 481725

Facility Name: Milton Nelson Number: \_\_\_\_\_

Qtrqr: NESW Sec: 21 Twp: 2N Range: 68W Meridian: 6

Latitude: 40.124020 Longitude: -105.009606

### CORRECTIVE ACTIONS:

1 CA# 160211

Corrective Action:

Date: 03/31/2022

Document information outlined below on the CA section of COGCC supplemental form 19 spill report to include the following (compliance of COGCC series 1100 flowline rules):

- 1) Outline root cause of failure resulting in spill (1104.k. Integrity Failure Investigation/Operator Determination)
- 2) Measures taken to prevent a recurrence of failure (1102.I Corrosion Control/ 1104. Integrity Management)
- 3) Description of flowline repair work completed (1102.j. Repair)
- 4) Confirm integrity of flowline repairs/ reconnections (via pressure testing) prior to returning flowline(s) to service (1102.j.4 and 1102.O)
- 5) Ensure flowline(s) are isolated and depressurized; associated wells and isolation valves are SI/ OOSLAT to prevent unintentional release per 1102.j.7 (at well/ facility prior to and during time of repair).

Response: CA COMPLETED

Date of Completion: 04/01/2022

Operator  
Comment:

Supplemental Form 19 submitted with this information. See Document 403002084, also attached.

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: Jennifer Galles

Signed:

Title: Consultant

Date: 4/1/2022 1:29:21 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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403002160	Form 19 Supplemental
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Total Attach: 1 Files