

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:
403086361

Date Received:
06/22/2022

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: 69175

Name of Operator: PDC ENERGY INC

Address: 1775 SHERMAN STREET - STE 3000

City: DENVER State: CO Zip: 80203

Contact Name and Telephone:

Name: _____

Phone: () _____ Fax: () _____

Email: _____

Additional Operator Contact:

Contact Name

Phone

Email

Tyranny Bergin

970-313-5547

EHSCOGCCInspections@pdce.com

COGCC INSPECTION SUMMARY:

FIR Document Number: 691201577

Inspection Date: 04/06/2022

FIR Submit Date: 04/07/2022

FIR Status: _____

Inspected Operator Information:

Company Name: PDC ENERGY INC

Company Number: 69175

Address: 1775 SHERMAN STREET - STE 3000

City: DENVER State: CO Zip: 80203

LOCATION - Location ID: 467698

Location Name: NYC N-65N67W Number: 24SESE County: _____

Qtrqr: SESW Sec: 24 Twp: 5n Range: 67w Meridian: 6

Latitude: 40.378060 Longitude: -104.838853

FACILITY - API Number: 05-123-00 Facility ID: 481729

Facility Name: Booth 25-32 Number: _____

Qtrqr: SESW Sec: 24 Twp: 5n Range: 67w Meridian: 6

Latitude: 40.378060 Longitude: -104.838853

CORRECTIVE ACTIONS:

1 CA# 160796

Corrective Action: Operator shall install controls to protect stormwater runoff as soon as practicable. Prior to the closure of the remediation, Operator will collect soil samples the area where impacted soils were installed.

Date: _____

Response: CA COMPLETED

Date of Completion: 06/22/2022

Operator Comment: Runoff was controlled during work. Area has now been backfilled and runoff possibilities no longer exist. CA complete.

COGCC Decision: _____

COGCC
Representative:

OPERATOR COMMENT AND SUBMITTAL

Comment: Runoff was controlled during work. Area has now been backfilled and runoff possibilities no longer exist. CA complete.

I hereby certify that the statements made in this form are, to the best of my knowledge, true, correct, and complete.

Print Name: Tyranny Bergin

Signed: _____

Title: Safety Representative

Date: 6/22/2022 10:04:00 AM

ATTACHMENT LIST

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

Document Number **Description**

<u>Document Number</u>	<u>Description</u>

Total Attach: 0 Files