

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:  
403109126

Date Received:  
07/19/2022

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: 16700

Name of Operator: CHEVRON USA INC

Address: 760 HORIZON DRIVE STE 401

City: GRAND JUNCTION State: CO Zip: 81506

Contact Name and Telephone:

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

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

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

Additional Operator Contact:

Contact Name	Phone	Email
-		<a href="mailto:RangelyRegulatr@scoutep.com">RangelyRegulatr@scoutep.com</a>
<a href="#">Patterson, Chris</a>		<a href="mailto:Chris.Patterson@scoutep.com">Chris.Patterson@scoutep.com</a>
<a href="#">Sanford, Anita</a>		<a href="mailto:Anita.Sanford@scoutep.com">Anita.Sanford@scoutep.com</a>
		<a href="mailto:andrewolson@chevron.com">andrewolson@chevron.com</a>

COGCC INSPECTION SUMMARY:

FIR Document Number: 696203842

Inspection Date: 07/07/2022

FIR Submit Date: 07/08/2022

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

Inspected Operator Information:

Company Name: CHEVRON USA INC

Company Number: 16700

Address: 760 HORIZON DRIVE STE 401

City: GRAND JUNCTION State: CO Zip: 81506

LOCATION - Location ID: 430614

Location Name: FEE Number: 163X County: \_\_\_\_\_

Qtrqr: NENE Sec: 33 Twp: 2N Range: 102W Meridian: 6

Latitude: 40.105611 Longitude: -108.842800

FACILITY - API Number: 05-103-00 Facility ID: 430614

Facility Name: FEE Number: 163X

Qtrqr: NENE Sec: 33 Twp: 2N Range: 102W Meridian: 6

Latitude: 40.105611 Longitude: -108.842800

CORRECTIVE ACTIONS:

1 CA# 163204

Corrective Action: Remove and properly dispose fluids and wildlife. Implement additional BMPs as necessary to minimize impacts to wildlife.

Date: 07/23/2022

Response: CA COMPLETED

Date of Completion: 07/19/2022

Completed-See Attached PIC

Operator Comment: \_\_\_\_\_

COGCC Decision: \_\_\_\_\_

COGCC Representative: \_\_\_\_\_

OPERATOR COMMENT AND SUBMITTAL

Comment: CA Completed-See Attached PIC

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

Print Name: Chris Patterson Signed: \_\_\_\_\_

Title: Sr. HSE Coordinator Date: 7/19/2022 6:45:39 AM

**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>
403109127	PIC

Total Attach: 1 Files