

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:

403091979

Date Received:

07/25/2022

FIR RESOLUTION FORM

Overall Status: CAC

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: 66561

Name of Operator: OXY USA INC

Address: PO BOX 173779

City: DENVER State: CO Zip: 80217-3779

Contact Name and Telephone:

Name: _____

Phone: () _____ Fax: () _____

Email: _____

Additional Operator Contact:

Contact Name

Phone

Email

NEWVILLE TONI

toni_newville@oxy.com

Eric Maestas

eric_maestas@oxy.com

COGCC INSPECTION SUMMARY:

FIR Document Number: 690203056

Inspection Date: 06/16/2022

FIR Submit Date: 06/20/2022

FIR Status: _____

Inspected Operator Information:

Company Name: OXY USA INC

Company Number: 66561

Address: PO BOX 173779

City: DENVER State: CO Zip: 80217-3779

LOCATION - Location ID: 324494

Location Name: KOSCOVE-627S70W Number: 15NWSE County: HUERFANO

Qtrqtr: NWSE Sec: 15 Twp: 27S Range: 70W Meridian: 6

Latitude: 37.698670 Longitude: -105.204770

FACILITY - API Number: 05-055- -00 Facility ID: 211782

Facility Name: KOSCOVE Number: 1

Qtrqtr: NWSE Sec: 15 Twp: 27S Range: 70W Meridian: 6

Latitude: 37.698670 Longitude: -105.204770

CORRECTIVE ACTIONS:

1 ☒ CA# 162822

Corrective Action: Comply with Rule 1003.a. and 606.

Date: 07/20/2022

Response: CA COMPLETED

Date of Completion: 07/20/2022

Operator Comment: Sand removed from location

COGCC Decision: Approved pending re-inspection

COGCC Representative:	
2	<input checked="" type="checkbox"/> CA# 162823
Corrective Action:	Comply with the 1003 interim reclamation rules. Date: <u>07/20/2022</u>
Response:	CA COMPLETED Date of Completion: <u>07/20/2022</u>
Operator Comment:	Disturbed areas reclaimed
COGCC Decision:	<u>Approved pending re-inspection</u>
COGCC Representative:	

<u>OPERATOR COMMENT AND SUBMITTAL</u>	
Comment:	Corrective actions completed
I hereby certify that the statements made in this form are, to the best of my knowledge, true, correct, and complete.	
Print Name: <u>Eric Maestas</u>	Signed: _____
Title: <u>HSE Advisor</u>	Date: <u>7/25/2022 2:25:12 PM</u>

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>
403091979	FIR RESOLUTION SUBMITTED
403115460	reclaimed areas and sand removal

Total Attach: 2 Files