

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:

403113909

Date Received:

07/22/2022

FIR RESOLUTION FORM

Overall Status: CAC

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: 10459
Name of Operator: EXTRACTION OIL & GAS INC
Address: 370 17TH STREET SUITE 5200
City: DENVER State: CO Zip: 80202

Contact Name and Telephone:

Name: _____

Phone: () _____ Fax: () _____

Email: _____

Additional Operator Contact:

Contact Name

Mike Storey

Phone

970-939-6353

Email

mstorey@civiresources.com

COGCC INSPECTION SUMMARY:

FIR Document Number: 702400774

Inspection Date: 07/21/2022

FIR Submit Date: 07/22/2022

FIR Status: _____

Inspected Operator Information:

Company Name: EXTRACTION OIL & GAS INC

Company Number: 10459

Address: 370 17TH STREET SUITE 5200

City: DENVER State: CO Zip: 80202

LOCATION - Location ID: 460669

Location Name: Blue Paintbrush Number: Facility County: _____

Qtrqr: NWS Sec: 18 Twp: 2N Range: 68W Meridian: 6
W

Latitude: 40.136766 Longitude: -105.054538

FACILITY - API Number: 05-123- -00 Facility ID: 460669

Facility Name: Blue Paintbrush Number: Facility

Qtrqr: NWS Sec: 18 Twp: 2N Range: 68W Meridian: 6
W

Latitude: 40.136766 Longitude: -105.054538

CORRECTIVE ACTIONS:

1 ☒ CA# 163488

Corrective Action: Comply with Rule 602.m Operators will provide self-contained physically secured sanitary facilities during drilling operations and at any other similarly staffed Oil and Gas Location or Oil and Gas Facility, and ensure that waste remains contained within the sanitary facilities.

Date: 07/22/2022

Response: CA COMPLETED

Date of Completion: 07/22/2022

Sanitary facility has been provided in compliance with rule 602.m

Operator
Comment:

COGCC Decision: Approved

COGCC Representative: Approved with inspection Doc # 702400795

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: Aubrey Noonan

Signed: _____

Title: Regulatory Analyst

Date: 7/22/2022 2:24:26 PM

ATTACHMENT LIST

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

Document Number Description

403113909	FIR RESOLUTION SUBMITTED
403113914	Inspection Photos

Total Attach: 2 Files