

State of Colorado Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203
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Document Number:
403223405

Date Received:
11/09/2022

FIR RESOLUTION FORM

Overall Status:

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: <u>47120</u>	Contact Name and Telephone:
Name of Operator: <u>KERR MCGEE OIL & GAS ONSHORE LP</u>	Name: _____
Address: <u>P O BOX 173779</u>	Phone: () _____ Fax: () _____
City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80217-3779</u>	Email: _____

Additional Operator Contact:

Contact Name	Phone	Email
<u>ERIN JOSEPH</u>	<u>970-515-1169</u>	<u>COGCCInspections@Oxy.com</u>

COGCC INSPECTION SUMMARY:

FIR Document Number: 697504195
 Inspection Date: 09/13/2022 FIR Submit Date: 09/27/2022 FIR Status: _____

Inspected Operator Information:

Company Name: KERR MCGEE OIL & GAS ONSHORE LP Company Number: 47120
 Address: P O BOX 173779
 City: DENVER State: CO Zip: 80217-3779

LOCATION - Location ID: 318925

Location Name: RIVERBEND Number: 2-24 County: _____
 Qtrqr: NWNE Sec: 24 Twp: 1N Range: 67W Meridian: 6
 Latitude: 40.042390 Longitude: -104.837280

FACILITY - API Number: 05-123-00 Facility ID: 318925

Facility Name: RIVERBEND Number: 2-24
 Qtrqr: NWNE Sec: 24 Twp: 1N Range: 67W Meridian: 6
 Latitude: 40.042390 Longitude: -104.837280

CORRECTIVE ACTIONS:

1 CA# 164927

Corrective Action: Comply with Rule 1105.f.(2). Form 44 should have been submitted within 90-days of completing abandonment. Date: 06/30/2021

Response: CA COMPLETED Date of Completion: 11/09/2022

Operator Comment: FLOWLINE WAS REMOVED 10/21/21 SEE ATTACHED

COGCC Decision: _____

COGCC
Representative:

2 CA# 164928

Corrective Action: Comply with Rule 1105.f.(2). Form 44 should have been submitted within 90-days of completing abandonment.

Date: 11/25/2021

Response: CA COMPLETED

Date of Completion: 11/09/2022

Operator
Comment:

FLOWLINE WAS REMOVED 10/21/21 SEE 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: ERIN JOSEPH

Signed:

Title: REGULATORY CONSULTANT

Date: 11/9/2022 8:00:15 AM

ATTACHMENT LIST

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

Document Number **Description**

403223411	FLOWLINE REMOVAL MAP
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Total Attach: 1 Files