

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:  
402731136

Date Received:  
06/28/2021

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: 10112  
Name of Operator: FOUNDATION ENERGY MANAGEMENT LLC  
Address: 5057 KELLER SPRINGS RD STE 650  
City: ADDISON State: TX Zip: 75001

Contact Name and Telephone:  
Name: \_\_\_\_\_  
Phone: ( ) \_\_\_\_\_ Fax: ( ) \_\_\_\_\_  
Email: \_\_\_\_\_

Additional Operator Contact:

Contact Name	Phone	Email
<u>Energy Foundation</u>		<u>regulatory@foundationenergy.com</u>

COGCC INSPECTION SUMMARY:

FIR Document Number: 700402754  
Inspection Date: 08/04/2020 FIR Submit Date: 08/05/2020 FIR Status: \_\_\_\_\_

Inspected Operator Information:

Company Name: FOUNDATION ENERGY MANAGEMENT LLC Company Number: 10112  
Address: 5057 KELLER SPRINGS RD STE 650  
City: ADDISON State: TX Zip: 75001

LOCATION - Location ID: 315485

Location Name: GENTRY-64S103W Number: 29NWNE County: RIO BLANCO  
Qtrqtr: NWNE Sec: 29 Twp: 4S Range: 103W Meridian: 6  
Latitude: 39.688690 Longitude: -108.978490

FACILITY - API Number: 05-103-00 Facility ID: 230911

Facility Name: GENTRY Number: 15-29-4-103  
Qtrqtr: NWNE Sec: 29 Twp: 4S Range: 103W Meridian: 6  
Latitude: 39.688690 Longitude: -108.978490

CORRECTIVE ACTIONS:

1  CA# 141011

Corrective Action: Securely fasten all valves, pipes, and fittings to ensure good mechanical condition, inspect at regular intervals and maintain in good mechanical condition per Rule 605.d. Date: 09/05/2020

Response: CA COMPLETED Date of Completion: 10/01/2020

Operator Comment: Corrective action is completed, see attached photo of wellhead.

COGCC Decision: Approved pending re-inspection

COGCC  
Representative:

**OPERATOR COMMENT AND SUBMITTAL**

Comment: Corrective action has been completed.

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

Print Name: Afton Iiams

Signed: \_\_\_\_\_

Title: HSE/Regulatory Technician

Date: 6/28/2021 10:07:20 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>
402731136	FIR RESOLUTION SUBMITTED
402731141	Location Photos

Total Attach: 2 Files