

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:  
402731981

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>Thompson, Bud</u>		<u>BLThomps@BLM.gov</u>
<u>Energy, Foundation</u>		<u>regulatory@foundationenergy.com</u>

### COGCC INSPECTION SUMMARY:

FIR Document Number: 700405190  
Inspection Date: 01/26/2021 FIR Submit Date: 01/28/2021 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: 316265

Location Name: SW RANGELY FED-61S102W Number: 4NENE County: RIO BLANCO  
Qtrqtr: NENE Sec: 4 Twp: 1S Range: 102W Meridian: 6  
Latitude: 40.004060 Longitude: -108.840750

### FACILITY - API Number: 05-103-00 Facility ID: 259924

Facility Name: SW RANGELY FED Number: 24-4-1-102  
Qtrqtr: NENE Sec: 4 Twp: 1S Range: 102W Meridian: 6  
Latitude: 40.004060 Longitude: -108.840750

### CORRECTIVE ACTIONS:

1 ☒ CA# 146144

Corrective Action: Provide bradenhead access with appropriate fittings to allow determination of pressure and fluid flow.

Date: 02/28/2021

Response: CA COMPLETED Date of Completion: 02/11/2021

Operator Comment: Corrective action completed, bradenhead access is present.

COGCC Decision: Approved pending re-inspection

COGCC  
Representative:

**OPERATOR COMMENT AND SUBMITTAL**

Comment: Corrective actions have 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 3:54:39 PM

**ATTACHMENT LIST**

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

**Document Number**      **Description**

402731981	FIR RESOLUTION SUBMITTED
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Total Attach: 1 Files