

# 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:  
403303561

Date Received:  
01/26/2023

## FIR RESOLUTION FORM

**Overall Status:**

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: <u>46290</u>	Contact Name and Telephone:
Name of Operator: <u>KP KAUFFMAN COMPANY INC</u>	Name: _____
Address: <u>1700 LINCOLN ST STE 4550</u>	Phone: ( ) _____ Fax: ( ) _____
City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80203</u>	Email: _____

Additional Operator Contact:

Contact Name	Phone	Email
<u>Victoria</u>	<u>Dizghinjili</u>	<u>vdizghinjili@kpk.com</u>

**COGCC INSPECTION SUMMARY:**

FIR Document Number: 702401437  
 Inspection Date: 01/23/2023      FIR Submit Date: 01/23/2023      FIR Status: \_\_\_\_\_

**Inspected Operator Information:**

Company Name: KP KAUFFMAN COMPANY INC      Company Number: 46290  
 Address: 1700 LINCOLN ST STE 4550  
 City: DENVER      State: CO      Zip: 80203

**LOCATION - Location ID: 318288**

Location Name: MARTIN T. HART H-62N67W      Number: 27NENW      County: WELD  
 Qtrqr: NENW      Sec: 27      Twp: 2N      Range: 67W      Meridian: 6  
 Latitude: 40.115180      Longitude: -104.879197

**FACILITY - API Number: 05-123-00      Facility ID: 241041**

Facility Name: MARTIN T. HART H      Number: 1  
 Qtrqr: NENW      Sec: 27      Twp: 2N      Range: 67W      Meridian: 6  
 Latitude: 40.115180      Longitude: -104.879197

**CORRECTIVE ACTIONS:**

**1** CA# 167120

Corrective Action: Calibrate gas metering equipment annually to comply with rule 430.d.(1).      Date: 02/23/2023

Response: CA COMPLETED      Date of Completion: 01/26/2023

Operator Comment: Meter is a property of DCP. KPK has submitted a request to DCP to have the meter calibrated to comply with Rule 430.d.(1) Proof of calibration will be provided on a Field Inspection Resolution Report.

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: Victoria Dizghinjili

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

Title: Engineering tech

Date: 1/26/2023 3:36:44 PM

**ATTACHMENT LIST**

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

**Document Number**      **Description**

<b><u>Document Number</u></b>	<b><u>Description</u></b>

Total Attach: 0 Files