

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:
403340356

Date Received:
03/08/2023

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: 10758

Name of Operator: OGRIS OPERATING LLC

Address: PO BOX 53467

City: MIDLAND State: TX Zip: 79710

Contact Name and Telephone:

Name: _____

Phone: () Fax: ()

Email: _____

Additional Operator Contact:

Contact Name	Phone	Email
<u>ZECHES, GIENA</u>	<u>719-220-4041</u>	<u>gzeches@ogrisop.com</u>
<u>BACA, DAVID</u>	<u>719-859-4066</u>	<u>dbaca@ogrisop.com</u>
<u>ATWATER, BONNIE</u>	<u>432-755-0212</u>	<u>batwater@ogrisop.com</u>

COGCC INSPECTION SUMMARY:

FIR Document Number: 690203925

Inspection Date: 02/23/2023

FIR Submit Date: 02/28/2023

FIR Status: _____

Inspected Operator Information:

Company Name: OGRIS OPERATING LLC

Company Number: 10758

Address: PO BOX 53467

City: MIDLAND State: TX Zip: 79710

LOCATION - Location ID: 307916

Location Name: HILL RANCH-635S67W Number: 10SWNW County: LAS ANIMAS

Qtrqr: SWN Sec: 10 Twp: 35S Range: 67W Meridian: 6

Latitude: 37.014770 Longitude: -104.881720

FACILITY - API Number: 05-071- -00 Facility ID: 259483

Facility Name: HILL RANCH Number: 10-05 V

Qtrqr: SWN Sec: 10 Twp: 35S Range: 67W Meridian: 6

Latitude: 37.014770 Longitude: -104.881720

CORRECTIVE ACTIONS:

1 CA# 167730

Corrective Action: Control and contain spills/releases and clean up per Rule 912.a.
Securely fasten all valves, pipes, and fittings to ensure good mechanical condition,
inspect
at regular intervals and maintain in good mechanical condition per Rule 608.

Date: 03/03/2023

Response: CA COMPLETED

Date of Completion: 03/03/2023

Operator
Comment:

THE LEAK AT THE WELL HEAD HAS BEEN REPAIRED AND CLEANED UP TO COMPLY WITH RULE 912.A.
ALL VALVES, PIPES, AND FITTINGS HAVE BEEN SECURELY FASTENED AND ALL EQUIPMENT HAS BEEN
INSPECTED TO ENSURE GOOD MECHANICAL CONDITION.

COGCC Decision: _____

COGCC
Representative: _____

OPERATOR COMMENT AND SUBMITTAL

Comment: CORRECTIVE ACTION HAS BEEN COMPLETED. PLEASE SEE PHOTO LOG FOR DETAILS.

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

Print Name: GIENA ZECHES

Signed: _____

Title: SR. ENVIRONMENTAL

Date: 3/8/2023 10:49:07 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>
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403340363	PHOTO LOG
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Total Attach: 1 Files