

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:

403359726

Date Received:

03/29/2023

FIR RESOLUTION FORM

Overall Status:

CA Summary:

2 of 3 CAs from the FIR responded to on this Form

2 CA Completed
0 Factual Review Request

OPERATOR INFORMATION

OGCC Operator Number: 16700

Name of Operator: CHEVRON USA INC

Address: 760 HORIZON DRIVE STE 401

City: GRAND JUNCTION State: CO Zip: 81506

Contact Name and Telephone:

Name: _____

Phone: () Fax: ()

Email: _____

Additional Operator Contact:

Contact Name

Phone

Email

Sanford, Anita

Anita.Sanford@scoutep.com

Chevron

970-257-6004

andrewolson@chevron.com

RangelyRegulatory@scoutep.com

Patterson, Chris

Chris.Patterson@scoutep.com

COGCC INSPECTION SUMMARY:

FIR Document Number: 696204800

Inspection Date: 03/24/2023

FIR Submit Date: 03/27/2023

FIR Status: _____

Inspected Operator Information:

Company Name: CHEVRON USA INC

Company Number: 16700

Address: 760 HORIZON DRIVE STE 401

City: GRAND JUNCTION State: CO Zip: 81506

LOCATION - Location ID: 314671

Location Name: A C MCLAUGHLIN-62N103W Number: 14NESW County: _____

Qtrqr: NESW Sec: 14 Twp: 2N Range: 103W Meridian: 6

Latitude: 40.141200 Longitude: -108.925650

FACILITY - API Number: 05-103- -00 Facility ID: 314671

Facility Name: A C MCLAUGHLIN-62N103W Number: 14NESW

Qtrqr: NESW Sec: 14 Twp: 2N Range: 103W Meridian: 6

Latitude: 40.141200 Longitude: -108.925650

CORRECTIVE ACTIONS:

2 CA# 168606

Corrective Action: Comply with Rule 606.

Date: 03/31/2023

Response: CA COMPLETED

Date of Completion: 03/29/2023

Pole removed

Operator
Comment:

COGCC Decision:

COGCC
Representative:

3 CA# 168607

Corrective Action: Conply with Rule 1002.f.(2)

Date: 03/29/2023

Response: CA COMPLETED

Date of Completion: 03/29/2023

Operator
Comment:

Brought in materials to help stabilize location, moved stock piles back onto location and will continue to improve location.

COGCC Decision:

COGCC
Representative:

OPERATOR COMMENT AND SUBMITTAL

Comment: Please see Attachments

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

Print Name: Chris Patterson

Signed:

Title: Sr. HSE Coordinator

Date: 3/29/2023 2:17:39 PM

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>
------------------------	--------------------

403359766	PIC
403359770	PIC

Total Attach: 2 Files