

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:

403384681

Date Received:

04/26/2023

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: 10779

Name of Operator: SCOUT ENERGY MANAGEMENT LLC

Address: 13800 MONTFORT DRIVE SUITE 100

City: DALLAS State: TX Zip: 75240

Contact Name and Telephone:

Name: \_\_\_\_\_

Phone: ( ) Fax: ( )

Email: \_\_\_\_\_

Additional Operator Contact:

Contact Name	Phone	Email
Kellerby, Shaun	(970) 712-1248	shaun.kellerby@state.co.us
Sanford, Anita	(970) 551-8313	Anita.Sanford@scoutep.com
Regulatory, Rangely		RangelyRegulatory@scoutep.com
Patterson, Chris		Chris.Patterson@scoutep.com

COGCC INSPECTION SUMMARY:

FIR Document Number: 702501180

Inspection Date: 04/24/2023

FIR Submit Date: 04/25/2023

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: 314378

Location Name: S H MCLAUGHLIN GOV- Number: 33SWNE County: RIO BLANCO  
62N102W

Qtrqtr: SWNE Sec: 33 Twp: 2N Range: 102W Meridian: 6

Latitude: 40.101470 Longitude: -108.846050

FACILITY - API Number: 05-103- -00 Facility ID: 314378

Facility Name: S H MCLAUGHLIN GOV- Number: 33SWNE  
62N102W

Qtrqtr: SWNE Sec: 33 Twp: 2N Range: 102W Meridian: 6

Latitude: 40.101470 Longitude: -108.846050

CORRECTIVE ACTIONS:

1 CA# 170080

Corrective Action: Provide proper BMPs to prevent sediment migration from location and lease road.

Date: 05/25/2023

Response: CA COMPLETED

Date of Completion: 04/26/2023

Operator  
Comment:

CORRECTIVE ACTIONS INCLUDE LIMITED VEHICLE TRAFFIC DURING WET CONDITIONS ON THE TWO ACCESS ROADS AND A TRACKING PAD HAS BEEN INSTALLED AT THE HIGHWAY ENTRANCE.

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: Anita Sanford

Signed:

\_\_\_\_\_

Title: Regulatory Analyst

Date: 4/26/2023 10:25:53 AM

\_\_\_\_\_

**ATTACHMENT LIST**

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

**Document Number**      **Description**

--	--

Total Attach: 0 Files