

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:
403396475

Date Received:
05/08/2023

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: <u>47120</u>	Contact Name and Telephone:
Name of Operator: <u>KERR MCGEE OIL & GAS ONSHORE LP</u>	Name: _____
Address: <u>501 N DIVISION BLVD</u>	Phone: () _____ Fax: () _____
City: <u>PLATTEVILLE</u> State: <u>CO</u> Zip: <u>80651</u>	Email: _____

Additional Operator Contact:

Contact Name	Phone	Email
		<u>COGCCinspections@oxy.com</u>

COGCC INSPECTION SUMMARY:

FIR Document Number: 696105459
 Inspection Date: 09/22/2022 FIR Submit Date: 09/29/2022 FIR Status: _____

Inspected Operator Information:

Company Name: KERR MCGEE OIL & GAS ONSHORE LP Company Number: 47120
 Address: P O BOX 173779
 City: DENVER State: CO Zip: 80217-3779

LOCATION - Location ID: 319675

Location Name: STATE OF COLORADO Y-61S67W Number: 16NENE County: _____
 Qtrqtr: NENE Sec: 16 Twp: 1S Range: 67W Meridian: 6
 Latitude: 39.969294 Longitude: -104.887842

FACILITY - API Number: 05-001-00

Facility ID: 319675

Facility Name: STATE OF COLORADO Y-61S67W Number: 16NENE
 Qtrqtr: NENE Sec: 16 Twp: 1S Range: 67W Meridian: 6
 Latitude: 39.969294 Longitude: -104.887842

CORRECTIVE ACTIONS:

1 CA# 164912

Corrective Action: Comply with Rule 1004. Collaborate with the surface owner to determine mitigating measures that will allow reclamation work to be conducted in such a manner as to not interfere with golf course operations. Provide documentation within the FIR Resolution form of when the corrective action work will be completed and provide date and documentation of coordination with the surface owner.

Date: 11/10/2022

Response: CA COMPLETED Date of Completion: 05/08/2023

Discussed material(s) storage with Todd Creek course management staff. Todd Creek indicated this area is used for course materials management and requested it be left as so. See attached email correspondence.

Operator Comment: _____

COGCC Decision: _____

COGCC Representative: _____

OPERATOR COMMENT AND SUBMITTAL

Comment: ATTN: Dylan Edwardson

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

Print Name: Austin Lee Signed: _____

Title: HSE Advisor Date: 5/8/2023 11:57:32 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>
403396481	Surface owner correspondence

Total Attach: 1 Files