

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:
403420047

Date Received:
06/01/2023

FIR RESOLUTION FORM

Overall Status:

CA Summary:

1 of 2 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

Patterson, Chris

Chris.Patterson@scoutep.com

Regulatory, Rangely

RangelyRegulatory@scoutep.com

Johnson, Mike

Mike.Johnson@scoutep.com

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RangelyRegulatory@scoutep.com

COGCC INSPECTION SUMMARY:

FIR Document Number: 702501249

Inspection Date: 05/03/2023

FIR Submit Date: 05/03/2023

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: 314375

Location Name: U P-62N102W Number: 34SWNW County: RIO BLANCO

Qtrqr: SWN Sec: 34 Twp: 2N Range: 102W Meridian: 6

Latitude: 40.101313 Longitude: -108.836528

FACILITY - API Number: 05-103-00 Facility ID: 228599

Facility Name: U P Number: 3-34

Qtrqr: SWN Sec: 34 Twp: 2N Range: 102W Meridian: 6

Latitude: 40.101313 Longitude: -108.836528

CORRECTIVE ACTIONS:

1 CA# 170487

Corrective Action:

Date: 07/03/2023

When no associated Tank battery is present at the Oil and Gas Location, the following additional information is required on the Well sign: Name of the Operator; Telephone number at which the Operator can be reached at all times; Telephone number for local emergency services (911 where available); The public road used to access the Well; Well name(s) and API number(s); The legal location of the Well(s) including the quarter/quarter section.

Response: CA COMPLETED

Date of Completion: 06/01/2023

Operator
Comment:

Signage has been updated to include required information.

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: 6/1/2023 1:19:51 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> |
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| 403420049 | photos |
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Total Attach: 1 Files