

# State of Colorado Oil and Gas Conservation Commission

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Document Number:  
403437558

Date Received:  
06/21/2023

## FIR RESOLUTION FORM

### Overall Status:

#### CA Summary:

7 of 7 CAs from the FIR responded to on this Form

7 CA Completed  
0 Factual Review Request

### OPERATOR INFORMATION

OGCC Operator Number: <u>40547</u>	Contact Name and Telephone:
Name of Operator: <u>HOLCOMB OIL &amp; GAS INC</u>	Name: _____
Address: <u>P O BOX 2058</u>	Phone: ( ) _____ Fax: ( ) _____
City: <u>FARMINGTON</u> State: <u>NM</u> Zip: <u>87499</u>	Email: _____

#### Additional Operator Contact:

Contact Name	Phone	Email
<u>Holcomb, Jeff</u>	<u>(505) 330-2473</u>	<u>holcomb.oilgas@gmail.com</u>
<u>.Engineering</u>		<u>dnr_cogccengineering@state.co.us</u>
<u>Holcomb, Jeff</u>	<u>(505) 326-0550</u>	<u>holcomb.oilgas@gmail.com</u>

### COGCC INSPECTION SUMMARY:

FIR Document Number: 700300607  
 Inspection Date: 06/06/2023 FIR Submit Date: 06/06/2023 FIR Status: \_\_\_\_\_

#### Inspected Operator Information:

Company Name: HOLCOMB OIL & GAS INC Company Number: 40547  
 Address: P O BOX 2058  
 City: FARMINGTON State: NM Zip: 87499

#### LOCATION - Location ID: 325521

Location Name: CASE-N34N8W Number: 10NWNW County: LA PLATA  
 Qtrqr: NWN Sec: 10 Twp: 34N Range: 8W Meridian: N  
W  
 Latitude: 37.234220 Longitude: -107.737970

#### FACILITY - API Number: 05-067-00 Facility ID: 214938

Facility Name: CASE Number: 1-10  
 Qtrqr: NWN Sec: 10 Twp: 34N Range: 8W Meridian: N  
W  
 Latitude: 37.234220 Longitude: -107.737970

### CORRECTIVE ACTIONS:

**1** CA# 172157

Corrective Action: meter gas and display calibration record from within last year per Rules 430.d (1&2) Date: \_\_\_\_\_

Response: CA COMPLETED Date of Completion: 06/16/2023

Gas meter is owned and operated by Harvest. Harvest notified of meter calibration on 06/07/2023. Meter was calibrated and tested by Harvest.

Operator  
Comment:

COGCC Decision:

COGCC  
Representative:

**2** CA# 172158

Corrective Action: install NFPA label per Rule 605

Date: 07/06/2023

Response: CA COMPLETED

Date of Completion: 06/08/2023

Operator  
Comment: New tank label installed on 06/08/2023

COGCC Decision:

COGCC  
Representative:

**3** CA# 172159

Corrective Action: Immediately stop venting gas to atmosphere per Rule 903.d

Date: \_\_\_\_\_

Response: CA COMPLETED

Date of Completion: 06/06/2023

Operator  
Comment: Well was shut in on 06/06/2023. Dump valve failure well was shut in on 06/06/2023 w/o replacement part and PRV replacement and inspection by PESCO. PESCO on location 06/19/2023, examined situation and have made inventory of parts needed. They will be back on location the week of June 26th.

COGCC Decision:

COGCC  
Representative:

**4** CA# 172160

Corrective Action: Install valid 24-hour operator contact number per Rule 605

Date: 06/08/2023

Response: CA COMPLETED

Date of Completion: 06/07/2023

Operator  
Comment: Phone number on wells signs were corrected on 06/07/2023.

COGCC Decision:

COGCC  
Representative:

**5** CA# 172726

Corrective Action: Retroactively submit nitiuce of return to service per Rule 405.p if well was returned to service.

Date: 06/06/2023

Submit monthly Form 7s per Rule 413

Response: CA COMPLETED

Date of Completion: 06/08/2023

Operator  
Comment: Holcomb has completed and filed all previously due Form 7 on 06/08/2023. All reports have been submitted and are current. Form 42, Return to Production, will be filed upon completion of surface facility repairs

COGCC Decision:

COGCC  
Representative:

6 CA# 172727

Corrective Action: Perform 5 MIT

Date: 07/06/2023

Response: CA COMPLETED

Date of Completion: 06/08/2023

Operator  
Comment: All Form 7's have been filed

COGCC Decision:

COGCC  
Representative:

7 CA# 172728

Corrective Action: Complete annual bradenhead test and submit Form 17 per Rule 419.c

Date: 06/06/2023

Response: CA COMPLETED

Date of Completion: 06/08/2023

Operator  
Comment: Bradenhead test was completed on 06/08/2023. The form will be attached to this report.

COGCC Decision:

COGCC  
Representative:

OPERATOR COMMENT AND SUBMITTAL

Comment: Kimray valves were vandalized.

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

Print Name: William J Holcomb

Signed:

Title: President

Date: 6/21/2023 1:11:19 PM

**ATTACHMENT LIST**

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

**Document Number**      **Description**

403437638	Bradenhead test report for Case 1-10
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Total Attach: 1 Files