

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:
403470551

Date Received:
07/20/2023

FIR RESOLUTION FORM

Overall Status:

CA Summary:

1 of 6 CAs from the FIR responded to on this Form

0 CA Completed
1 Factual Review Request

OPERATOR INFORMATION

OGCC Operator Number: 10433

Name of Operator: LARAMIE ENERGY LLC

Address: 1700 LINCOLN ST STE 3950

City: DENVER State: CO Zip: 80203

Contact Name and Telephone:

Name: _____

Phone: () Fax: ()

Email: _____

Additional Operator Contact:

Contact Name

Phone

Email

Arauz, Steven

steven.arauza@state.co.us

Laramie

cogccnotifications@laramie-energy.com

COGCC INSPECTION SUMMARY:

FIR Document Number: 696205102

Inspection Date: 07/14/2023

FIR Submit Date: 07/18/2023

FIR Status: _____

Inspected Operator Information:

Company Name: LARAMIE ENERGY LLC

Company Number: 10433

Address: 1700 LINCOLN ST STE 3950

City: DENVER State: CO Zip: 80203

LOCATION - Location ID: 452807

Location Name: CC Number: 0697-03-07 Pad County: _____

Qtrqr: Lot 11 Sec: 3 Twp: 6S Range: 97W Meridian: 6

Latitude: 39.558439 Longitude: -108.205081

FACILITY - API Number: 05-045-00 Facility ID: 452807

Facility Name: CC Number: 0697-03-07 Pad

Qtrqr: Lot 11 Sec: 3 Twp: 6S Range: 97W Meridian: 6

Latitude: 39.558439 Longitude: -108.205081

CORRECTIVE ACTIONS:

6 CA# 175772

Corrective Action: Comply with Rule 1002.f. The "Date of Discovery" is being used as the corrective action date; Location will remain out of compliance until corrective action has been resolved.

Date: _____

Response: FACTUAL REVIEW REQUEST

Basis for Review: Equipment is not owned or controlled by the operator

Operator Comment: The self-contained porta johns are secured and maintained by a 3rd party contractor. The units are located within the pad boundaries and within the bermed secondary containment for the pad. The installation of a secondary containment would create a tripping hazard.

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: Lori Muhr

Signed: _____

Title: Regulatory Specialist

Date: 7/20/2023 7:48:04 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>
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Total Attach: 0 Files