

State of Colorado
Energy & Carbon Management Commission



1120 Lincoln Street, Suite 801, Denver, Colorado 80203
Phone: (303) 894-2100 Fax: (303) 894-2109

Document Number:
403426828

Date Received:
06/08/2023

FIR RESOLUTION FORM

Overall Status: CAC

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: 47120
Name of Operator: KERR MCGEE OIL & GAS ONSHORE LP
Address: 501 N DIVISION BLVD
City: PLATTEVILLE State: CO Zip: 80651

Contact Name and Telephone:
Name: _____
Phone: () _____ Fax: () _____
Email: _____

Additional Operator Contact:

Contact Name	Phone	Email
		<u>Austin_Lee@oxy.com</u>
		<u>COGCCInspections@Oxy.co</u>

COGCC INSPECTION SUMMARY:

FIR Document Number: 709400144
Inspection Date: 04/05/2023 FIR Submit Date: 04/21/2023 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: 435007

Location Name: GRENEYER Number: 37C-3HZ County: _____
Qtrqtr: NENE Sec: 34 Twp: 1N Range: 67W Meridian: 6
Latitude: 40.013428 Longitude: -104.869623

FACILITY - API Number: 05-123-00 Facility ID: 435007

Facility Name: GRENEYER Number: 37C-3HZ
Qtrqtr: NENE Sec: 34 Twp: 1N Range: 67W Meridian: 6
Latitude: 40.013428 Longitude: -104.869623

CORRECTIVE ACTIONS:

1 CA# 169949

Corrective Action: To comply with Rule 1002. Operator shall reclaim, reseed and stabilize the flowline scare. Date: 05/12/2023

Response: CA COMPLETED Date of Completion: 06/01/2023

Operator Comment: See attached work completion report.

COGCC Decision:

Approved pending re-inspection

COGCC
Representative:

The approval of this FIRR is an acknowledgement that the document was received. It is not a final approval as the outcome of the methods will be determined on the ground during an inspection at a future date.

COGCC
Supervisor:

The approval of this FIRR is an acknowledgement that the document was received. It is not a final approval as the outcome of the methods will be determined on the ground during an inspection at a future date.

OPERATOR COMMENT AND SUBMITTAL

Comment: ATTN: Reed Wold

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: 6/8/2023 7:36:37 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>
403426828	FIR RESOLUTION SUBMITTED
403426835	Work Completion Report

Total Attach: 2 Files