

State of Colorado
Energy & Carbon Management Commission



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Document Number:
403486341

Date Received:
08/03/2023

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
		Drew_Stormo@oxy.com
		COGCCInspections@Oxy.com
		Austin_Lee@oxy.com

COGCC INSPECTION SUMMARY:

FIR Document Number: 709400353
Inspection Date: 06/26/2023 FIR Submit Date: 07/06/2023 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: 319429

Location Name: UPRR 42 PAN AM AQ TRUE-62N66W Number: 17SESE County: _____
Qtrqtr: SESE Sec: 17 Twp: 2N Range: 66W Meridian: 6
Latitude: 40.133770 Longitude: -104.795660

FACILITY - API Number: 05-123-00 Facility ID: 319429

Facility Name: UPRR 42 PAN AM AQ TRUE-62N66W Number: 17SESE
Qtrqtr: SESE Sec: 17 Twp: 2N Range: 66W Meridian: 6
Latitude: 40.133770 Longitude: -104.795660

CORRECTIVE ACTIONS:

1 CA# 174764

Corrective Action: Comply with Rule 606.c. Date: 07/06/2023

Response: CA COMPLETED Date of Completion: 07/20/2023

Please reference attached completions report.

Operator
Comment:

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: Tyler Scherden

Signed: _____

Title: HSE Representative

Date: 8/3/2023 3:48:42 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>
403486341	FIR RESOLUTION SUBMITTED
403486353	Work Completions Report

Total Attach: 2 Files