

State of Colorado Energy & Carbon Management Commission



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Document Number:
403537761

Date Received:
09/21/2023

FIR RESOLUTION FORM

Overall Status:

CA Summary:

3 of 3 CAs from the FIR responded to on this Form

3 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>Drew Stormo@oxy.com</u>
		<u>Austin Lee@oxy.com</u>

COGCC INSPECTION SUMMARY:

FIR Document Number: 709400379
Inspection Date: 07/05/2023 FIR Submit Date: 08/01/2023 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: 336245

Location Name: BROWN Number: 13C-26HZ County: _____
Qtrqtr: SWS Sec: 35 Twp: 3N Range: 66W Meridian: 6
W
Latitude: 40.176030 Longitude: -104.752060

FACILITY - API Number: 05-123-00 Facility ID: 336245

Facility Name: BROWN Number: 13C-26HZ
Qtrqtr: SWS Sec: 35 Twp: 3N Range: 66W Meridian: 6
W
Latitude: 40.176030 Longitude: -104.752060

CORRECTIVE ACTIONS:

1 CA# 176998

Corrective Action: Comply with Rule 606.c. Date: 08/07/2023

Response: CA COMPLETED Date of Completion: 08/23/2023

Operator Comment: See attached WRRCR.

COGCC Decision: _____

COGCC
Representative:

2 CA# 176999

Corrective Action: Comply with Rule 606.d.

Date: 08/04/2023

Response: CA COMPLETED

Date of Completion: 08/23/2023

Operator
Comment:

See attached WRCR.

COGCC Decision: _____

COGCC
Representative:

3 CA# 177000

Corrective Action: Comply with rule 1002.f. Stormwater Management

Date: 08/08/2023

Response: CA COMPLETED

Date of Completion: 08/23/2023

Operator
Comment:

See attached WRCR.

COGCC Decision: _____

COGCC
Representative:

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: Advisor HSE Environ Ops

Date: 9/21/2023 2:08:17 PM

ATTACHMENT LIST

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

Document Number **Description**

403537771	Work Completion Report
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Total Attach: 1 Files