

State of Colorado
Energy & Carbon Management Commission



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Document Number:
403569999

Date Received:
10/24/2023

FIR RESOLUTION FORM

Overall Status:

CA Summary:

2 of 2 CAs from the FIR responded to on this Form

0 CA Completed
2 Factual Review Request

OPERATOR INFORMATION

OGCC Operator Number: 97120

Name of Operator: WISE* WAYNE L

Address: P O BOX 5116

City: ENGLEWOOD State: CO Zip: 80155

Contact Name and Telephone:

Name:

Phone: () Fax: ()

Email:

Additional Operator Contact:

Contact Name

Phone

Email

Wise, Wayne

405-826-7013

wwise36@earthlink.net

COGCC INSPECTION SUMMARY:

FIR Document Number: 701007508

Inspection Date: 10/10/2023

FIR Submit Date: 10/20/2023

FIR Status:

Inspected Operator Information:

Company Name: WISE* WAYNE L

Company Number: 97120

Address: P O BOX 5116

City: ENGLEWOOD State: CO Zip: 80155

LOCATION - Location ID: 303377

Location Name: ALICE WELP-61S45W Number: 10SWSW County: YUMA

Qtrqtr: SWS Sec: 10 Twp: 1S Range: 45W Meridian: 6
W

Latitude: 39.978280 Longitude: -102.408310

FACILITY - API Number: 05-125-00 Facility ID: 253011

Facility Name: ALICE WELP Number: 1-10

Qtrqtr: SWS Sec: 10 Twp: 1S Range: 45W Meridian: 6
W

Latitude: 39.978280 Longitude: -102.408310

CORRECTIVE ACTIONS:

1 CA# 185612

Corrective Action: Remove equipment and begin final reclamation process

Date: 11/20/2023

Response: FACTUAL REVIEW REQUEST

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

Operator Comment: Meter run and separator equipment are the property and responsibility of Duke Gas Gathering LLC .

COGCC Decision: _____

COGCC
Representative:

2 CA# 185613

Corrective Action: Remove equipment and begin final reclamation process

Date: 11/20/2023

Response: FACTUAL REVIEW REQUEST

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

Operator
Comment: Meter run and separator equipment are the property and responsibility of Duke Gas Gathering LLC.

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: Wayne Wise

Signed: _____

Title: Owner/Operator

Date: 10/24/2023 5:43:54 AM

ATTACHMENT LIST

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

Document Number	Description

Total Attach: 0 Files