

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:

403591455

Date Received:

11/09/2023

FIR RESOLUTION FORM

Overall Status: CAC

CA Summary:

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

2 CA Completed
0 Factual Review Request

OPERATOR INFORMATION

OGCC Operator Number: 46290

Name of Operator: KP KAUFFMAN COMPANY INC

Address: 1700 LINCOLN ST STE 4550

City: DENVER State: CO Zip: 80203

Contact Name and Telephone:

Name: _____

Phone: () _____ Fax: () _____

Email: _____

Additional Operator Contact:

Contact Name

Victoria Dizghinjili

Phone

303-825-4822

Email

vdizghinjili@kpk.com

COGCC INSPECTION SUMMARY:

FIR Document Number: 699107496

Inspection Date: 10/04/2023

FIR Submit Date: 10/04/2023

FIR Status: _____

Inspected Operator Information:

Company Name: KP KAUFFMAN COMPANY INC

Company Number: 46290

Address: 1700 LINCOLN ST STE 4550

City: DENVER State: CO Zip: 80203

LOCATION - Location ID: 327344

Location Name: LOST CREEK STATE-64N62W Number: 36SWSW County: WELD

Qtrqtr: SWS Sec: 36 Twp: 4N Range: 62W Meridian: 6
W

Latitude: 40.263840 Longitude: -104.279200

FACILITY - API Number: 05-123- -00

Facility ID: 246731

Facility Name: LOST CREEK STATE Number: 7

Qtrqtr: SWS Sec: 36 Twp: 4N Range: 62W Meridian: 6
W

Latitude: 40.263840 Longitude: -104.279200

CORRECTIVE ACTIONS:

1 ☒ CA# 183001

Corrective Action: Comply with Rule 606.

Date: 10/20/2023

Response: CA COMPLETED

Date of Completion: 10/20/2023

Operator
Comment:

Unused equipment and trash have been removed from location. Please see attached pictures.

COGCC Decision: Approved via an AMI

COGCC
Representative:

2

☒ CA# 183002

Corrective Action: Comply with Rule 606.

Date: 10/20/2023

Response: CA COMPLETED

Date of Completion: 10/20/2023

Operator
Comment:

Weeds have been removed from location. Please see attached pictures.

COGCC Decision: Approved via an AMI

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: Victoria Dizghinjili

Signed: _____

Title: ET

Date: 11/9/2023 1:56:03 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>
403591455	FIR RESOLUTION SUBMITTED
403591461	Weeds and trash removed PIC

Total Attach: 2 Files