

State of Colorado
Energy & Carbon Management Commission



Document Number:
403631055

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

Date Received:
12/19/2023

FIR RESOLUTION FORM

Overall Status:

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: 69175

Name of Operator: PDC ENERGY INC

Address: 1099 18TH STREET SUITE 1500

City: DENVER State: CO Zip: 80202

Contact Name and Telephone:

Name: _____

Phone: () Fax: ()

Email: _____

Additional Operator Contact:

Contact Name

Phone

Email

Tyranny Bergin

970-313-5547

EHSCOGCCInspections@pdce.com

COGCC INSPECTION SUMMARY:

FIR Document Number: 701900991

Inspection Date: 07/15/2023

FIR Submit Date: 08/15/2023

FIR Status: _____

Inspected Operator Information:

Company Name: PDC ENERGY INC

Company Number: 69175

Address: 1775 SHERMAN STREET - STE 3000

City: DENVER State: CO Zip: 80203

LOCATION - Location ID: 319113

Location Name: DAVIS FARMS-66N65W Number: 28NWSE County: _____

Qtrqtr: NWSE Sec: 28 Twp: 6N Range: 65W Meridian: 6

Latitude: 40.455494 Longitude: -104.665519

FACILITY - API Number: 05-123-00 Facility ID: 319113

Facility Name: DAVIS FARMS-66N65W Number: 28NWSE

Qtrqtr: NWSE Sec: 28 Twp: 6N Range: 65W Meridian: 6

Latitude: 40.455494 Longitude: -104.665519

CORRECTIVE ACTIONS:

1 CA# 178507

Corrective Action: Comply with Rule 1004. Collaborate with the landowner to allow reclamation work to be conducted in such a manner as to not interfere with agricultural activities or crop production.

Date: 07/15/2023

The corrective date is not intended to be the date for which the Operator shall complete the corrective actions but rather the corrective date is the date the location was observed out of compliance.

Response: CA COMPLETED

Date of Completion: 12/07/2023

Work has been completed and will continue to monitor. CA complete.

Operator _____
Comment: _____

COGCC Decision: _____

COGCC Representative: _____

OPERATOR COMMENT AND SUBMITTAL

Comment: Work has been completed and will continue to monitor. CA complete.

I hereby certify that the statements made in this form are, to the best of my knowledge, true, correct, and complete.

Print Name: Tyranny Bergin Signed: _____

Title: H&S Specialist-Operations Date: 12/19/2023 10:09:30 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> |
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| 403631057 | 2 |
| 403631058 | 3 |

Total Attach: 3 Files