

State of Colorado  
Energy & Carbon Management Commission



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Document Number:  
403638469

Date Received:  
12/28/2023

## FIR RESOLUTION FORM

### Overall Status:

#### 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: 66561

Name of Operator: OXY USA INC

Address: PO BOX 173779

City: DENVER State: CO Zip: 80217-3779

Contact Name and Telephone:

Name:

Phone: ( ) Fax: ( )

Email:

#### Additional Operator Contact:

Contact Name

Phone

Email

ERIN JOSEPH

970-515-1169

ECMCINSPECTIONS@OXY.COM

Eric Maestas

eric\_maestas@oxy.com

### COGCC INSPECTION SUMMARY:

FIR Document Number: 690203063

Inspection Date: 06/16/2022

FIR Submit Date: 06/23/2022

FIR Status:

#### Inspected Operator Information:

Company Name: OXY USA INC

Company Number: 66561

Address: PO BOX 173779

City: DENVER State: CO Zip: 80217-3779

#### LOCATION - Location ID: 437155

Location Name: Sheep Mountain Unit Number: 1-12-B County: HUERFANO

Qtrqr: SESW Sec: 1 Twp: 28S Range: 70W Meridian: 6

Latitude: 37.636890 Longitude: -105.171290

#### FACILITY - API Number: 05-055-00 Facility ID: 437156

Facility Name: Sheep Mountain Unit Number: 1-12-B

Qtrqr: SESW Sec: 1 Twp: 28S Range: 70W Meridian: 6

Latitude: 37.636890 Longitude: -105.171290

### CORRECTIVE ACTIONS:

1 CA# 162847

Corrective Action: Securely fasten all valves, pipes, fittings, and Production Facilities to ensure good mechanical condition, inspect at regular intervals and maintain in good mechanical condition per Rule 608.e

Date: 06/16/2022

Response: CA COMPLETED

Date of Completion: 06/16/2022

Operator  
Comment:

COMPLETED SAME DAY, TECHS INSPECTED AREA AND DID NOT FIND ANY LEAKS FROM EQUIPMENT

COGCC Decision: \_\_\_\_\_

COGCC  
Representative:

**2** CA# 162848

Corrective Action: Comply with Rule 1003.f.

Date: 07/01/2022

Response: CA COMPLETED

Date of Completion: 07/01/2022

Operator  
Comment:

NOXIOUS WEEDS HAVE BEEN MITIGATED PER THE WEED MANAGEMENT PLAN

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: ERIN JOSEPH

Signed: \_\_\_\_\_

Title: SR REGUALTORY ADVISOR

Date: 12/28/2023 10:21:08 AM

### **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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Total Attach: 0 Files