

State of Colorado Energy & Carbon Management Commission



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Document Number:
403675003

Date Received:
02/02/2024

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: 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: 713900139

Inspection Date: 11/28/2023

FIR Submit Date: 12/06/2023

FIR Status: _____

Inspected Operator Information:

Company Name: PDC ENERGY INC

Company Number: 69175

Address: 1099 18TH STREET SUITE 1500

City: DENVER State: CO Zip: 80202

LOCATION - Location ID: 329853

Location Name: Sanford Number: 21-29 Pad County: _____

Qtrqtr: NENW Sec: 29 Twp: 5N Range: 66W Meridian: 6

Latitude: 40.375420 Longitude: -104.805000

FACILITY - API Number: 05-123-00 Facility ID: 329853

Facility Name: Sanford Number: 21-29 Pad

Qtrqtr: NENW Sec: 29 Twp: 5N Range: 66W Meridian: 6

Latitude: 40.375420 Longitude: -104.805000

CORRECTIVE ACTIONS:

1 CA# 188918

Corrective Action: The operator will maintain tank placards according to Rule 605.

Date: 11/28/2023

Response: CA COMPLETED

Date of Completion: 01/10/2024

Operator Comment: Methanol tote placard has been replaced. CA complete.

COGCC Decision: _____

COGCC
Representative:

2 CA# 188919

Corrective Action: Install or fix required BMP's per Rule 1002.f. in accordance with good engineering practices.

Date: 11/28/2023

Response: CA COMPLETED

Date of Completion: 02/01/2024

Operator Comment: BMP's have been repaired. CA complete.

COGCC Decision:

COGCC
Representative:

OPERATOR COMMENT AND SUBMITTAL

Comment: Methanol tote placard has been replaced. BMP's have been repaired. CA's 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: 2/2/2024 9:35:42 AM

ATTACHMENT LIST

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

Document Number **Description**

403675165	Placard
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Total Attach: 1 Files