

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:

403687634

Date Received:

02/14/2024

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: 47120

Name of Operator: KERR MCGEE OIL & GAS ONSHORE LP

Address: 501 N DIVISION BLVD

City: PLATTEVILLE State: CO Zip: 80651

Contact Name and Telephone:

Name: _____

Phone: () Fax: ()

Email: _____

Additional Operator Contact:

Contact Name

Phone

Email

Binschus, Chris

chris.binschus@state.co.us

COGCCInspections@Oxy.com

COGCC INSPECTION SUMMARY:

FIR Document Number: 713900263

Inspection Date: 01/11/2024

FIR Submit Date: 01/17/2024

FIR Status: _____

Inspected Operator Information:

Company Name: KERR MCGEE OIL & GAS ONSHORE LP

Company Number: 47120

Address: P O BOX 173779

City: DENVER State: CO Zip: 80217-3779

LOCATION - Location ID: 328213

Location Name: BELL-63N66W Number: 12NENW County: WELD

Qtrqtr: NENW Sec: 12 Twp: 3N Range: 66W Meridian: 6

Latitude: 40.245570 Longitude: -104.727640

FACILITY - API Number: 05-123- -00 Facility ID: 247907

Facility Name: BELL Number: L12-3

Qtrqtr: NENW Sec: 12 Twp: 3N Range: 66W Meridian: 6

Latitude: 40.245570 Longitude: -104.727640

CORRECTIVE ACTIONS:

1 CA# 190081

Corrective Action: Comply with Rule 1004. Reseed disturbance areas using a seed mixture requested by the surface owner, or a mixture prescribed by the local county NRCS. Establish vegetation with total perennial, non-invasive uniform plant cover of at least eighty (80) percent of reference area levels. Ensure erosion controls are implemented to stabilize the seeded soil. Operator shall continue to monitor and manage this site until the location meets Rule 1004 standards, including stormwater and weed management.

Date: 01/11/2024

Response: CA COMPLETED

Date of Completion: 02/02/2024

Operator
Comment: See attached work completion report.

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: Austin Lee

Signed: _____

Title: Advisor HSE Environ Ops

Date: 2/14/2024 2:09:44 PM

ATTACHMENT LIST

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

Document Number Description

403687641	Work Request Completion Report
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Total Attach: 1 Files