

State of Colorado
Energy & Carbon Management Commission

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Document Number:
403737278

Date Received:
04/01/2024

FIR RESOLUTION FORM

Overall Status: FRQ

CA Summary:

1 of 1 CAs from the FIR responded to on this Form

0 CA Completed
1 Factual Review Request

OPERATOR INFORMATION

OGCC Operator Number: 47120
Name of Operator: KERR MCGEE OIL & GAS ONSHORE LP
Address: P O BOX 173779
City: DENVER State: CO Zip: 80217-3779
Contact Name and Telephone:
Name: _____
Phone: () _____ Fax: () _____
Email: _____

Additional Operator Contact:

Contact Name	Phone	Email
<u>ERIN JOSEPH</u>	<u>970-515-1169</u>	<u>ECMCINSPECTIONS@OXY.COM</u>

COGCC INSPECTION SUMMARY:

FIR Document Number: 710100188
Inspection Date: 03/11/2024 FIR Submit Date: 03/28/2024 FIR Status: _____

Inspected Operator Information:

Company Name: KERR MCGEE GATHERING LLC Company Number: 47121
Address: PO BOX 173779
City: DENVER State: CO Zip: 80217

LOCATION - Location ID: _____

Location Name: _____ Number: _____ County: _____
Qtrqtr: SESE Sec: 32 Twp: 2N Range: 66W Meridian: 6
Latitude: 40.087523 Longitude: -104.791847

FACILITY - API Number: 05-123- -00 Facility ID: 485223

Facility Name: Pipeline 16-75-81-8 Number: _____
Qtrqtr: SESE Sec: 32 Twp: 2N Range: 66W Meridian: 6
Latitude: 40.087523 Longitude: -104.791847

CORRECTIVE ACTIONS:

1 CA# 193709

Corrective Action: Operator shall immediately remove material tracked onto sidewalks. Additionally, Operator shall implement, modify or maintain BMPs to prevent tracking of material offsite. Operator shall comply with Rule 1002.f.

Date: 04/11/2024

Response: FACTUAL REVIEW REQUEST

Basis for Review: Operator does not own or operate the location

Operator Comment: THIS IS A WESTERN MIDSTREAM OPERATION, WE HAVE FORWARDED THE INSPECTION REPORT ON TC THEM TO HANDLE

COGCC Decision: **Not Approved**

COGCC Representative: FIR was submitted for Operator of Record for both Spill ID and Facility ID "KERR MCGEE GATHERING LLC 47121"

COGCC Supervisor: Confirmed operator of record on COGIS.

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 REGULATORY ADVISOR Date: 4/1/2024 7:55:30 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>
403737278	FIR RESOLUTION SUBMITTED

Total Attach: 1 Files