

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:

403842862

Date Received:

07/02/2024

FIR RESOLUTION FORM

Overall Status:

CA Summary:

3 of 3 CAs from the FIR responded to on this Form

3 CA Completed
0 Factual Review Request

OPERATOR INFORMATION

ECMC 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

ERIN JOSEPH

Phone

970-515-1169

Email

ECMCInspections@Oxy.com

ECMC INSPECTION SUMMARY:

FIR Document Number: 714201131

Inspection Date: 06/12/2024

FIR Submit Date: 06/14/2024

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: 306737

Location Name: REI H Number: 17-21D County: _____

Qtrqtr: NWN Sec: 17 Twp: 3N Range: 65W Meridian: 6
W

Latitude: 40.229078 Longitude: -104.692138

FACILITY - API Number: 05-123- -00 Facility ID: 306737

Facility Name: REI H Number: 17-21D

Qtrqtr: NWN Sec: 17 Twp: 3N Range: 65W Meridian: 6
W

Latitude: 40.229078 Longitude: -104.692138

CORRECTIVE ACTIONS:

1 CA# 195885

Corrective Action: Comply with Rule 606

Date: 06/26/2024

Response: CA COMPLETED

Date of Completion: 07/01/2024

Operator
Comment:

SEE ATTACHED PHOTOS

ECMC Decision: _____

ECMC Representative:			
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CA# 195886

Corrective Action:	Comply with Rule 606.	Date:	07/14/2024
Response:	CA COMPLETED	Date of Completion:	07/01/2024
Operator Comment:	SEE ATTACHED PHOTOS		
ECMC Decision:			
ECMC Representative:			

3

CA# 195887

Corrective Action:	Comply with Rule 606.	Date:	06/26/2024
Response:	CA COMPLETED	Date of Completion:	07/01/2024
Operator Comment:	SEE ATTACHED PHOTOS		
ECMC Decision:			
ECMC Representative:			

OPERATOR COMMENT AND SUBMITTAL

Comment:			
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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:	7/2/2024 10:36:00 AM

ATTACHMENT LIST

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

Document Number	Description
403842875	LOCATION PHOTO
403842878	LOCATION PHOTO
403842879	LOCATION PHOTO

Total Attach: 3 Files