

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:
403849112

Date Received:
07/09/2024

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

ECMC 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

ECMC INSPECTION SUMMARY:

FIR Document Number: 707602878

Inspection Date: 05/29/2024

FIR Submit Date: 05/30/2024

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: 330519

Location Name: LOUSTALET-65N64W Number: 15NENE County: _____

Qtrqtr: NENE Sec: 15 Twp: 5N Range: 64W Meridian: 6

Latitude: 40.404415 Longitude: -104.529444

FACILITY - API Number: 05-123-00 Facility ID: 330519

Facility Name: LOUSTALET-65N64W Number: 15NENE

Qtrqtr: NENE Sec: 15 Twp: 5N Range: 64W Meridian: 6

Latitude: 40.404415 Longitude: -104.529444

CORRECTIVE ACTIONS:

1 CA# 195518

Corrective Action: *Remove unnecessary equipment from Abandoned Well & Battery site(s).
Comply with Rule 606.
Corrective Action date: 06/14/2024. (15 days).
See photo(s) #1, 3, 4.
*Please attach photo(s) to FIRR to verify Corrective Action(s) have been resolved.
*A follow up on this site inspection will be conducted to ensure that compliance issues

Date: 06/14/2024

Response: CA COMPLETED

Date of Completion: 06/28/2024

All work has been completed and ready for re-inspection. CA complete.

Operator _____
Comment: _____

ECMC Decision: _____

ECMC Representative: _____

OPERATOR COMMENT AND SUBMITTAL

Comment: All work has been completed and ready for re-inspection. CA 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 Date: 7/9/2024 2:51:32 PM

ATTACHMENT LIST

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

Document Number **Description**

<u>Document Number</u>	<u>Description</u>

Total Attach: 0 Files