

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:
403922675

Date Received:
09/16/2024

FIR RESOLUTION FORM

Overall Status: CAC

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: 10396
Name of Operator: SWN PRODUCTION COMPANY LLC
Address: P.O. BOX 12359
City: SPRING State: TX Zip: 77391-2359

Contact Name and Telephone:
Name: _____
Phone: () _____ Fax: () _____
Email: _____

Additional Operator Contact:

Contact Name	Phone	Email
		<u>swnsandwash@swn.com</u>
		<u>liz_gee@swn.com</u>
		<u>Karen_Manerotis@swn.com</u>
<u>Neidel, Kris</u>		<u>kris.neidel@state.co.us</u>

ECMC INSPECTION SUMMARY:

FIR Document Number: 696206163
Inspection Date: 08/21/2024 FIR Submit Date: 09/04/2024 FIR Status: _____

Inspected Operator Information:

Company Name: SWN PRODUCTION COMPANY LLC Company Number: 10396
Address: P.O. BOX 12359
City: SPRING State: TX Zip: 77391-2359

LOCATION - Location ID: 313149

Location Name: WALKER 7-93-12 Number: PAD5 County: _____
Qtrqr: CNE Sec: 12 Twp: 7N Range: 93W Meridian: 6
Latitude: 40.575996 Longitude: -107.777727

FACILITY - API Number: 05-081-00 Facility ID: 313149

Facility Name: WALKER 7-93-12 Number: PAD5
Qtrqr: CNE Sec: 12 Twp: 7N Range: 93W Meridian: 6
Latitude: 40.575996 Longitude: -107.777727

CORRECTIVE ACTIONS:

1 CA# 198349

Corrective Action: See "COGCC Comments" at the end of this report. Date: 10/15/2024

Response: CA COMPLETED Date of Completion: 09/11/2024

. The land owner has requested that the gravel remain on site. The power poles seen on the edge of pad do not belong to pad and all signage has been removed.

Operator
Comment:

ECMC Decision: **Not Approved**

ECMC
Representative:

See "ECMC Email Correspondence to SWN" document attached.

ECMC
Supervisor:

See "ECMC Email Correspondence to SWN" document attached.

OPERATOR COMMENT AND SUBMITTAL

Comment: The operator would like to be contacted prior to inspection so that a representative can be on location during this time

I hereby certify that the statements made in this form are, to the best of my knowledge, true, correct, and complete.

Print Name: Karen Maneotis

Signed:

Title: Regulatory Specialist

Date: 9/16/2024 2:53:25 PM

ATTACHMENT LIST

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

<u>Document Number</u>	<u>Description</u>
403922675	FIR RESOLUTION SUBMITTED
403926055	ECMC Email Correspondence to SWN

Total Attach: 2 Files