

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:

404005988

Date Received:

11/25/2024

FIR RESOLUTION FORM

Overall Status:

CA Summary:

2 of 2 CAs from the FIR responded to on this Form

2 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

Phone

Email

Mickelson, Erik

Erik Mickelson@oxy.com

ERIN JOSEPH

970-515-1169

ECMCInspections@Oxy.com

ECMC INSPECTION SUMMARY:

FIR Document Number: 714300130

Inspection Date: 09/17/2024

FIR Submit Date: 09/17/2024

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: 332269

Location Name: VARGAS-62N67W Number: 13NESW County: WELD

Qtrqtr: NESW Sec: 13 Twp: 2N Range: 67W Meridian: 6

Latitude: 40.136690 Longitude: -104.841636

FACILITY - API Number: 05-123-00 Facility ID: 271482

Facility Name: VARGAS Number: 11-13

Qtrqtr: NESW Sec: 13 Twp: 2N Range: 67W Meridian: 6

Latitude: 40.136690 Longitude: -104.841636

CORRECTIVE ACTIONS:

1 CA# 198851

Corrective Action: Secure access to excavation in compliance with Rule 913.b.(5).B.i and ECMC Guidance 913.b.(5)B i-v

Date: 09/24/2024

Response: CA COMPLETED

Date of Completion: 09/20/2024

Operator
Comment:

1. Fencing: Excavation was backfilled on 9/20/24 (see attached photos)

ECMC Decision: _____

ECMC
Representative:

2 CA# 198852

Corrective Action: In accordance with Rule 913.e.(3), Operator will adopt and maintain a quarterly reporting schedule (90 days). Operator shall provide an updated Form 27 for Remediation #34980.

Date: 10/01/2024

Response: CA COMPLETED

Date of Completion: 09/27/2024

Operator
Comment:

A Form 27 Supplemental was submitted on 9/27/24 (document number 403935744)

ECMC Decision:

ECMC
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: ERIN JOSEPH

Signed:

Title: SR REGULATORY ADVISOR

Date: 11/25/2024 12:39:35 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>
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404005991	LOCATION PHOTOS
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Total Attach: 1 Files