

State of Colorado Energy & Carbon Management Commission



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Document Number:
404496809

Date Received:
01/07/2026

FIR RESOLUTION FORM

Overall Status:

CA Summary:

1 of 5 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
.		rbucogccinspectionreports@chevron.onmicrosoft.com
Graber, Nikki		nikki.graber@state.co.us
Peterson, Dan		danpeterson@chevron.com
Mitchem, Katelyn		katelyn.mitchem@state.co.us
Peterson, Tom		tom.peterson@state.co.us
Rollins, Grace		grace.rollins@state.co.us
Brown, Kari		kari.oakman@state.co.us

ECMC INSPECTION SUMMARY:

FIR Document Number: 718300095
Inspection Date: 10/30/2025 FIR Submit Date: 11/04/2025 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: 428148

Location Name: Gaddis Number: 36J-HZ Pad County: _____
Qtrqtr: NWN Sec: 36 Twp: 4N Range: 68W Meridian: 6
W
Latitude: 40.276540 Longitude: -104.956600

FACILITY - API Number: 05-123-00 Facility ID: 428148

Facility Name: Gaddis Number: 36J-HZ Pad
Qtrqtr: NWN Sec: 36 Twp: 4N Range: 68W Meridian: 6
W
Latitude: 40.276540 Longitude: -104.956600

CORRECTIVE ACTIONS:

Corrective Action: Comply with Rule 606.a. and ECMC Rule 1004.a which states: "Upon the plugging and abandonment of a well, all pits, mouse and rat holes and cellars shall be backfilled. All debris, abandoned gathering line risers and flowline risers, and surface equipment shall be removed within three (3) months of plugging a well."

Date: 12/16/2025

Response: CA COMPLETED

Date of Completion: 01/07/2026

Operator Comment: Complied with Rule 1004 and removed unused equipment.

ECMC Decision:

ECMC Representative:

OPERATOR COMMENT AND SUBMITTAL

Comment: See photos. 1 well to cut and cap on the pad still. Working on consolidating all REMS into a single Form/Site plan with documentation requested from the inspection report.

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

Print Name: Jeff White

Signed:

Title: HSE

Date: 1/7/2026 9:38:15 AM

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>
404496844	photos
404496845	photo

Total Attach: 2 Files