

State of Colorado
Energy & Carbon Management Commission



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Phone: (303) 894-2100 Fax: (303) 894-2109

Document Number:
404510095

Date Received:
01/16/2026

FIR RESOLUTION FORM

Overall Status:

CA Summary:

1 of 2 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
<u>Peterson, Dan</u>		<u>danpeterson@chevron.com</u>
<u>Graber, Nikki</u>		<u>nikki.graber@state.co.us</u>
<u>Dunnam, Anthony</u>		<u>anthony.dunnam@state.co.us</u>
<u>Rollins, Grace</u>		<u>grace.rollins@state.co.us</u>
<u>Brown, Kari</u>		<u>kari.oakman@state.co.us</u>
-		<u>rbucogccinspectionreports@chevron.onmicrosoft.com</u>

ECMC INSPECTION SUMMARY:

FIR Document Number: 718300093

Inspection Date: 10/30/2025

FIR Submit Date: 11/03/2025

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: 430790

Location Name: Campbell JF PAD Number: 17-41D County: _____

Qtrqtr: SWNE Sec: 17 Twp: 2N Range: 65W Meridian: 6

Latitude: 40.142183 Longitude: -104.683867

FACILITY - API Number: 05-123-00 Facility ID: 491381

Facility Name: Campbell JF PAD 17-41D Number: _____

Qtrqtr: SWNE Sec: 17 Twp: 2N Range: 65W Meridian: 6

Latitude: 40.142183 Longitude: -104.683867

CORRECTIVE ACTIONS:

2 CA# 209110

Corrective Action:

Date: 10/02/2025

Quarterly reporting is required for REM 33091. Operator is behind on quarterly reporting. The last Form 27s (Doc #404264879) was received on 7/04/2025. In accordance with Rule 913.e.(3), Operator will adopt a quarterly reporting schedule (every 90 days); additional violations may result in enforcement. CA due date backdated to when the quarterly Form 27s was due.

Response: CA COMPLETED

Date of Completion: 12/06/2025

Operator Comment: Form 27 doc # 404383729.

ECMC Decision: _____

ECMC Representative: _____

OPERATOR COMMENT AND SUBMITTAL

Comment: Please see F27 and attachments for additional information. Working on providing manifests.

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: 1/16/2026 4:48:39 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>

Total Attach: 0 Files