

State of Colorado Energy & Carbon Management Commission



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Document Number:
404663520

Date Received:
05/19/2026

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
<u>ERIN JOSEPH</u>	<u>970-515-1169</u>	<u>ECMCInspections@Oxy.com</u>

ECMC INSPECTION SUMMARY:

FIR Document Number: 697602629
Inspection Date: 05/08/2026 FIR Submit Date: 05/12/2026 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: 305222

Location Name: SWEETGRASS-61N68W Number: 14SWNW County: _____
Qtrqtr: SWN Sec: 14 Twp: 1N Range: 68W Meridian: 6
W
Latitude: 40.053442 Longitude: -104.976993

FACILITY - API Number: 05-123-00 Facility ID: 491921

Facility Name: Sweetgrass 12-14 Wellhead Number: _____
Qtrqtr: SWN Sec: 14 Twp: 1N Range: 68W Meridian: 6
W
Latitude: 40.053442 Longitude: -104.976993

CORRECTIVE ACTIONS:

1 CA# 212851

Corrective Action: Operators will fence or cover open trench/excavation to prevent access when sites are not attended Remediation Safety fence Rule 913.b.(5)B. operator shall fix fallen fence. Date: 05/19/2026

Response: CA COMPLETED Date of Completion: 05/15/2026

Operator Comment: SEE ATTACHED LOCATION PHOTOS

ECMC Decision:

ECMC
Representative:

2 CA# 212852

Corrective Action: Operator shall properly store, handle, transport, treat, recycle, or dispose of E&P waste per Rule 905.

Date: 05/26/2026

Response: CA COMPLETED

Date of Completion: 05/15/2026

Operator
Comment: LOCATION PHOTOS ATTACHED

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: REGUALTORY

Date: 5/19/2026 10:42:40 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>
404663527	LOCATION PHOTOS

Total Attach: 1 Files