

State of Colorado
Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203
Phone: (303) 894-2100 Fax: (303) 894-2109



Document Number:
401396001
Date Received:
09/06/2017

FIR RESOLUTION FORM

CA Summary:

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

0 CA Completed
1 Factual Review Request

OPERATOR INFORMATION

OGCC Operator Number: 10459
Name of Operator: EXTRACTION OIL & GAS INC
Address: 370 17TH STREET SUITE 5300
City: DENVER State: CO Zip: 80202
Contact Name and Telephone:
Name: _____
Phone: () _____ Fax: () _____
Email: _____

Additional Operator Contact:

Contact Name	Phone	Email
Rickard, Jeff	720-557-08310	jrickard@extractionog.com

COGCC INSPECTION SUMMARY:

FIR Document Number: 688300148
Inspection Date: 08/30/2017 FIR Submit Date: 09/05/2017 FIR Status: _____

Inspected Operator Information:

Company Name: BISON EXPLORATION LLC Company Number: 10646
Address: PO BOX 1168
City: DENVER State: CO Zip: 80202

LOCATION - Location ID: 320750

Location Name: COLUMBINE-STATE-64S64W Number: 16SENE County: ARAPAHOE
Qtrqr: SENE Sec: 16 Twp: 4S Range: 64W Meridian: 6
Latitude: 39.706030 Longitude: -104.548090

FACILITY - API Number: 05-005-00 Facility ID: 204785

Facility Name: COLUMBINE-STATE Number: 2
Qtrqr: SENE Sec: 16 Twp: 4S Range: 64W Meridian: 6
Latitude: 39.706030 Longitude: -104.548090

CORRECTIVE ACTIONS:

1 ☒ CA# 97953

Corrective Action: Comply with Rule 603.f. Date: 11/03/2017

Response: FACTUAL REVIEW REQUEST

Basis for Review: CA dates are not per the guidelines

Operator Comment: This well was plugged on 8/2/17, Extraction has 90 days to remove the equipment per the rule (1004.a), which would be 11/3/17. Extraction requests this be changed to a comment from a corrective action since we are still in our 90 day window.

COGCC Decision: Approved

COGCC
Representative:

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COGCC
Supervisor:

A subsequent Form 6 was required to be submitted within 30 days of the P&A, All equipment and flowlines must be removed before 11/3/2017.

OPERATOR COMMENT AND SUBMITTAL

Comment:

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

Print Name: Jeff Rickard

Signed: _____

Title: Regulatory Compliance Co

Date: 9/6/2017 12:54:32 PM

ATTACHMENT LIST

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

<u>Document Number</u>	<u>Description</u>
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401396001	FIR RESOLUTION SUBMITTED
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Total Attach: 1 Files