

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:
401452893

Date Received:
11/07/2017

FIR RESOLUTION FORM

Overall Status: FRQ

CA Summary:

2 of 3 CAs from the FIR responded to on this Form

0 CA Completed
2 Factual Review Request

OPERATOR INFORMATION

OGCC Operator Number: 6720

Name of Operator: BAYLESS PRODUCER LLC* ROBERT L

Address: P O BOX 168

City: FARMINGTON State: NM Zip: 87499

Contact Name and Telephone:

Name: _____

Phone: () _____ Fax: () _____

Email: _____

Additional Operator Contact:

Contact Name

Phone

Email

Trujillo, Helen

5053262659

notices@rlbayless.com

COGCC INSPECTION SUMMARY:

FIR Document Number: 689800379

Inspection Date: 10/06/2017

FIR Submit Date: 11/01/2017

FIR Status: _____

Inspected Operator Information:

Company Name: BAYLESS PRODUCER LLC* ROBERT L

Company Number: 6720

Address: 621 17TH ST STE 2300

City: DENVER State: CO Zip: 80293

LOCATION - Location ID: 313011

Location Name: ZIMMERMAN/CHAMBERLIN-66N91W Number: 4SWSE County: MOFFAT

Qtrqtr: SWSE Sec: 4 Twp: 6N Range: 91W Meridian: 6

Latitude: 40.502760 Longitude: -107.608920

FACILITY - API Number: 05-081-00 Facility ID: 223304

Facility Name: ZIMMERMAN/CHAMBERLIN Number: 1

Qtrqtr: SWSE Sec: 4 Twp: 6N Range: 91W Meridian: 6

Latitude: 40.502760 Longitude: -107.608920

CORRECTIVE ACTIONS:

1 CA# 109127

Corrective Action: Comply with Rule 603.f .

Date: 11/02/2017

Response: FACTUAL REVIEW REQUEST

Basis for Review: Equipment is not owned or controlled by the operator

Operator
Comment:

Equipment is owned by Moffat Pipeline Company and is not on our wellpad.

COGCC Decision: _____

COGCC
Representative:

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2 CA# 109128

Corrective Action: Comply with Rule 603.f .

Date: 12/01/2017

Response: FACTUAL REVIEW REQUEST

Basis for Review: Equipment belongs to the surface owner

Operator
Comment: This is not on our wellpad. This is on the landowner property.

COGCC Decision: _____

COGCC
Representative:

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OPERATOR COMMENT AND SUBMITTAL

Comment: Bayless will submit when run-on has been been taken care of next to our water tank on our wellpad.

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

Print Name: Helen Trujillo

Signed: _____

Title: Production Asst

Date: 11/7/2017 6:48:20 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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Total Attach: 0 Files