

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:

401503551

Date Received:

01/04/2018

FIR RESOLUTION FORM

Overall Status: CAC

CA Summary:

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

2 CA Completed
0 Factual Review Request

OPERATOR INFORMATION

OGCC Operator Number: 94300

Name of Operator: WARD & SON* ALFRED

Address: P O BOX 737

City: OGALLALLA State: NE Zip: 69153

Contact Name and Telephone:

Name: _____

Phone: () _____ Fax: () _____

Email: _____

Additional Operator Contact:

Contact Name	Phone	Email
Randy Ward	3082800100	randy@wardoil.com

COGCC INSPECTION SUMMARY:

FIR Document Number: 688300722

Inspection Date: 11/29/2017

FIR Submit Date: 11/30/2017

FIR Status: _____

Inspected Operator Information:

Company Name: WARD & SON* ALFRED

Company Number: 94300

Address: P O BOX 737

City: OGALLALLA State: NE Zip: 69153

LOCATION - Location ID: 317124

Location Name: KLOEFKORN-63S53W Number: 6NENE County: WASHINGTON

Qtrqr: NENE Sec: 6 Twp: 3S Range: 53W Meridian: 6

Latitude: 39.824780 Longitude: -103.352010

FACILITY - API Number: 05-121-00 Facility ID: 236555

Facility Name: KLOEFKORN Number: 1

Qtrqr: NENE Sec: 6 Twp: 3S Range: 53W Meridian: 6

Latitude: 39.824780 Longitude: -103.352010

CORRECTIVE ACTIONS:

1 CA# 112427

Corrective Action: Repair or install berms or other secondary containment devices per Rule 906.d.(1).

Date: 01/02/2018

Response: CA COMPLETED

Date of Completion: 12/01/2017

Operator Comment: Berms were rebuilt to rid them of holes

COGCC Decision: _____

COGCC
Representative:

2 CA# 112428

Corrective Action: Spill reporting (Form 19) completed.

Date: 11/28/2017

Response: CA COMPLETED

Date of Completion: 11/29/2017

Operator Comment: 19 was done 11/29/2017 and a 19S will follow

COGCC Decision:

COGCC
Representative:

OPERATOR COMMENT AND SUBMITTAL

Comment: Berms were redone to rid of holes
and 19 was filed upon my notice and a 19s to follow

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

Print Name: randy ward

Signed:

Title: pres

Date: 1/4/2018 4:57:14 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>

Total Attach: 0 Files