

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:
401498176
Date Received:
12/29/2017

FIR RESOLUTION FORM

CA Summary:
1 of 1 CAs from the FIR responded to on this Form
1 CA Completed
0 Factual Review Request

OPERATOR INFORMATION

OGCC Operator Number: 95960
Name of Operator: WEXPRO COMPANY
Address: P O BOX 45003
City: SALT LAKE CITY State: UT Zip: 84145-0601
Contact Name and Telephone:
Name:
Phone: () Fax: ()
Email:

Additional Operator Contact:

Contact Name Phone Email
Tammy Fredrickson 3073527514 Tammy.Fredrickson@dominionenergy.com

COGCC INSPECTION SUMMARY:

FIR Document Number: 689800369
Inspection Date: 10/04/2017 FIR Submit Date: 10/18/2017 FIR Status:

Inspected Operator Information:

Company Name: WEXPRO COMPANY Company Number: 95960
Address: P O BOX 45003
City: SALT LAKE CITY State: UT Zip: 84145-0601

LOCATION - Location ID: 312834

Location Name: HIAWATHA MIDDLE OIL-612N100W Number: 23NWNE County: MOFFAT
Qtrqtr: NWNE Sec: 23 Twp: 12N Range: 100W Meridian: 6
Latitude: 40.990188 Longitude: -108.599790

FACILITY - API Number: 05-081-00 Facility ID: 222546

Facility Name: HIAWATHA MIDDLE OIL Number: 13 F WILSON
Qtrqtr: NWNE Sec: 23 Twp: 12N Range: 100W Meridian: 6
Latitude: 40.990188 Longitude: -108.599790

CORRECTIVE ACTIIONS:

1 CA# 105832

Corrective Action: Contact COGCC EPS staff regarding Rule 906.c. Date: 10/20/2017

Response: CA COMPLETED Date of Completion: 10/19/2017

Operator Comment: Email sent to Emily Waldron on 10/19/2017 clarifying that Wexpro has an active Form 27 in place with a sampling plan. The remediation area on location is tied to REM 9836 and was approved by COGCC, and BLM. Due to the amount of contamination, two remediation areas were approved, one at MOSU and one at the F Wilson 13 location across the road. There are no actions for Wexpro to complete.

COGCC Decision: Approved

COGCC
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: Tammy Fredrickson

Signed: _____

Title: Senior Permit Agent

Date: 12/29/2017 1:19:17 PM

ATTACHMENT LIST

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

Document Number **Description**

401498176	FIR RESOLUTION SUBMITTED
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Total Attach: 1 Files