

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:
401694843
Date Received:
07/06/2018

FIR RESOLUTION FORM

Overall Status: FRQ

CA Summary:

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

0 CA Completed
2 Factual Review Request

OPERATOR INFORMATION

OGCC Operator Number: 10531
Name of Operator: VANGUARD OPERATING LLC
Address: 5847 SAN FELIPE #3000
City: HOUSTON State: TX Zip: 77057

Contact Name and Telephone:
Name: _____
Phone: () _____ Fax: () _____
Email: _____

Additional Operator Contact:

Contact Name	Phone	Email
<u>Ghan, Scott</u>	<u>970-744-8128</u>	<u>sghan@vnrenergy.com</u>
<u>Aaron, Axelson</u>	<u>230-0926</u>	<u>aaxelson@vnrenergy.com</u>

COGCC INSPECTION SUMMARY:

FIR Document Number: 689301463
Inspection Date: 07/05/2018 FIR Submit Date: 07/05/2018 FIR Status: _____

Inspected Operator Information:

Company Name: VANGUARD OPERATING LLC Company Number: 10531
Address: 5847 SAN FELIPE #3000
City: HOUSTON State: TX Zip: 77057

LOCATION - Location ID: 322510

Location Name: MOBILE-66S92W Number: 20NESW County: GARFIELD
Qtrqtr: NESW Sec: 20 Twp: 6S Range: 92W Meridian: 6
Latitude: 39.509476 Longitude: -107.693676

FACILITY - API Number: 05-045-00 Facility ID: 210663

Facility Name: MOBILE Number: 11-20
Qtrqtr: NESW Sec: 20 Twp: 6S Range: 92W Meridian: 6
Latitude: 39.509476 Longitude: -107.693676

CORRECTIVE ACTIIONS:

1 CA# 117213

Corrective Action: Install sign to comply with Rule 210.e. Date: 09/05/2018

Response: FACTUAL REVIEW REQUEST

Basis for Review: Findings are inappropriately tied to multiple wells

Operator Comment: The sign is legible and in compliance with Rule 210.e, as seen in the inspection photos. The tank placard could have been noted on the FIR, but did not need to be listed as a CA. Vanguard Operating will replace the tank placard, but we have seen several of these unwarranted CAs recently related to tank placards.

COGCC Decision: _____

COGCC
Representative:

2 CA# 117214

Corrective Action:

Date: 11/05/2018

Response: FACTUAL REVIEW REQUEST

Basis for Review: Equipment belongs to the surface owner

Operator
Comment:

COGCC Decision: _____

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: Scott Ghan

Signed: _____

Title: Senior EHS Specialist

Date: 7/6/2018 7:32:50 AM

ATTACHMENT LIST

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

Document Number **Description**

401694849	Email Correspondence
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Total Attach: 1 Files