

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:

401709530

Date Received:

07/20/2018

FIR RESOLUTION FORM

Overall Status: CAC

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: 96340

Name of Operator: WIEPKING-FULLERTON ENERGY LLC

Address: 96 GLENMOOR LN

City: ENGLEWOOD State: CO Zip: 80113

Contact Name and Telephone:

Name: _____

Phone: () _____ Fax: () _____

Email: _____

Additional Operator Contact:

Contact Name	Phone	Email
<u>Boone, Linda</u>	<u>(720) 271-8605</u>	<u>LDBoonePar@aol.com</u>
<u>Halde, Kerry</u>	<u>(719) 340-0329</u>	<u>haldeoil@hotmail.com</u>
<u>Herian, Tim</u>	<u>(316) 655-9200</u>	<u>therian1@cox.net</u>

COGCC INSPECTION SUMMARY:

FIR Document Number: 682503514

Inspection Date: 06/19/2018

FIR Submit Date: 06/20/2018

FIR Status: _____

Inspected Operator Information:

Company Name: WIEPKING-FULLERTON ENERGY LLC

Company Number: 96340

Address: 96 GLENMOOR LN

City: ENGLEWOOD State: CO Zip: 80113

LOCATION - Location ID: 433577

Location Name: Big Wampum Number: 1S County: _____

Qtrqtr: NESE Sec: 23 Twp: 10S Range: 56W Meridian: 6

Latitude: 39.162840 Longitude: -103.624100

FACILITY - API Number: 05-073- -00 Facility ID: 433577

Facility Name: Big Wampum Number: 1S

Qtrqtr: NESE Sec: 23 Twp: 10S Range: 56W Meridian: 6

Latitude: 39.162840 Longitude: -103.624100

CORRECTIVE ACTIONS:

1 CA# 116905

Corrective Action: Install or repair required stormwater and erosion control BMPs in accordance to Rule 1002.f

Date: 07/20/2018

Response: CA COMPLETED

Date of Completion: 07/20/2018

Operator Comment: Planning commenced prior to the week of 7/16/2018. Work commenced on 7/18/2018 and was completed on 7/20/2018. Operator consulted with LT Environmental to plan the for the work.

COGCC Decision: _____

COGCC
Representative:

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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: Linda Boone

Signed: _____

Title: Agent

Date: 7/20/2018 3:42:29 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