

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:

401724724

Date Received:

08/06/2018

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: 69175

Name of Operator: PDC ENERGY INC

Address: 1775 SHERMAN STREET - STE 3000

City: DENVER State: CO Zip: 80203

Contact Name and Telephone:

Name: _____

Phone: () Fax: ()

Email: _____

Additional Operator Contact:

Contact Name

Phone

Email

Erin Dougherty

970-313-5541

ehscogccinspections@pdce.com

COGCC INSPECTION SUMMARY:

FIR Document Number: 679701014

Inspection Date: 07/31/2018

FIR Submit Date: 08/01/2018

FIR Status: _____

Inspected Operator Information:

Company Name: PDC ENERGY INC

Company Number: 69175

Address: 1775 SHERMAN STREET - STE 3000

City: DENVER State: CO Zip: 80203

LOCATION - Location ID: 319532

Location Name: SITZMAN-65N65W Number: 27NWSW County: _____

Qtrqr: NWS Sec: 27 Twp: 5N Range: 65W Meridian: 6

Latitude: 40.368575 Longitude: -104.656508

FACILITY - API Number: 05-123- -00 Facility ID: 319532

Facility Name: SITZMAN-65N65W Number: 27NWSW

Qtrqr: NWS Sec: 27 Twp: 5N Range: 65W Meridian: 6

Latitude: 40.368575 Longitude: -104.656508

CORRECTIVE ACTIONS:

1 CA# 117757

Corrective Action: Submit Form 27 Supplemental Site Investigation and Remediation Workplan to COGCC and include results of the excavation, treatment and backfill of impacted material. Include figures showing excavation footprint, soil sample locations and locations of proposed monitoring wells. Include schedule for monitoring well installation.

Date: 08/07/2018

Response: CA COMPLETED

Date of Completion: 08/03/2018

Form 27 submitted on 8/3.

Operator
Comment:

COGCC Decision: **Not Approved**

COGCC Representative: Form 27 submitted by Operator did not include the requested site diagram of proposed monitoring well locations or a schedule for monitoring well installation. See Conditions of Approval on Form 27 Doc#401718708 for further requirements.

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: Erin Dougherty

Signed:

Title: Safety Representative

Date: 8/6/2018 7:13:41 AM

ATTACHMENT LIST

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

Document Number **Description**

401724724	FIR RESOLUTION SUBMITTED
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Total Attach: 1 Files