

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:

401758434

Date Received:

09/10/2018

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: 96155

Name of Operator: WHITING OIL & GAS CORPORATION

Address: 1700 BROADWAY STE 2300

City: DENVER State: CO Zip: 80290

Contact Name and Telephone:

Name: \_\_\_\_\_

Phone: ( ) \_\_\_\_\_ Fax: ( ) \_\_\_\_\_

Email: \_\_\_\_\_

Additional Operator Contact:

Contact Name

Phone

Email

Kyle Waggoner

4326616647

kyle.waggoner@whiting.com

COGCC INSPECTION SUMMARY:

FIR Document Number: 682503792

Inspection Date: 08/29/2018

FIR Submit Date: 08/31/2018

FIR Status: \_\_\_\_\_

Inspected Operator Information:

Company Name: WHITING OIL & GAS CORPORATION

Company Number: 96155

Address: 1700 BROADWAY STE 2300

City: DENVER State: CO Zip: 80290

LOCATION - Location ID: 437030

Location Name: Razor Number: 33 County: \_\_\_\_\_  
Production

Qtrqtr: SESW Sec: 33 Twp: 10N Range: 58W Meridian: 6

Latitude: 40.788736 Longitude: -103.870114

FACILITY - API Number: 05-123- -00 Facility ID: 437030

Facility Name: Razor Number: 33  
Production

Qtrqtr: SESW Sec: 33 Twp: 10N Range: 58W Meridian: 6

Latitude: 40.788736 Longitude: -103.870114

CORRECTIVE ACTIONS:

1 CA# 118347

Corrective Action: Perform reclamation on areas not reasonably needed for production in accordance with COGCC reclamation rule 1003.b

Date: 11/15/2018

Response: CA COMPLETED

Date of Completion: 11/15/2018

Operator Comment: We are requesting a factual review of the interim reclamation acreage. According to our records, the approved Form 2A has an interim reclamation of 8.7 acres and it has been reclaimed to 4.9 acres. In addition, this remaining area is needed for future maintenance, truck access, and production activities.

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: Kyle Waggoner

Signed: \_\_\_\_\_

Title: Field Regulatory Manager

Date: 9/10/2018 3:19:59 PM

**ATTACHMENT LIST**

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

**Document Number**      **Description**

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Total Attach: 0 Files