

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:

401785250

Date Received:

10/05/2018

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: 10536

Name of Operator: SMITH ENERGY LLC

Address: 1540 MAIN ST SUITE 218 #334

City: WINDSOR State: CO Zip: 80550

Contact Name and Telephone:

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

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

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

Additional Operator Contact:

Contact Name

Smith, Chris

Phone

(303) 709-6157

Email

smithenergy@live.com

COGCC INSPECTION SUMMARY:

FIR Document Number: 688302407

Inspection Date: 08/28/2018

FIR Submit Date: 08/30/2018

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

Inspected Operator Information:

Company Name: SMITH ENERGY LLC

Company Number: 10536

Address: 1540 MAIN ST SUITE 218 #334

City: WINDSOR State: CO Zip: 80550

LOCATION - Location ID: 317372

Location Name: HICKERT-63S49W Number: 17SWNE County: WASHINGTON

Qtrqr: SWNE Sec: 17 Twp: 3S Range: 49W Meridian: 6

Latitude: 39.796460 Longitude: -102.882932

FACILITY - API Number: 05-121-00 Facility ID: 272177

Facility Name: HICKERT Number: 32A-17349

Qtrqr: SWNE Sec: 17 Twp: 3S Range: 49W Meridian: 6

Latitude: 39.796460 Longitude: -102.882932

CORRECTIVE ACTIONS:

1 CA# 118332

Corrective Action: Location is within an exception zone, repair or install berms or other secondary containment devices per Rule 604.c.(3)B.

Date: 09/14/2018

Response: CA COMPLETED

Date of Completion: 09/12/2018

Operator Comment: Repaired/Installed Berms and I have attached a picture to this FIR Resolution to be able to approve by Alternative Means of Inspection.

COGCC Decision: \_\_\_\_\_

COGCC  
Representative:

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**OPERATOR COMMENT AND SUBMITTAL**

Comment: I have attached a picture to this FIR Resolution to be able to approve by Alternative Means of Inspection.

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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: Chris Smith

Signed:

Title: Manager

Date: 10/5/2018 6:47:08 AM

**ATTACHMENT LIST**

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

<b><u>Document Number</u></b>	<b><u>Description</u></b>
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Total Attach: 1 Files