

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:  
401913963  
Date Received:  
01/22/2019

FIR RESOLUTION FORM

Overall Status: CAC

CA Summary:

1 of 3 CAs from the FIR responded to on this Form

1 CA Completed  
0 Factual Review Request

OPERATOR INFORMATION

OGCC Operator Number: 10672

Name of Operator: TIMBER CREEK OPERATING LLC

Address: 1001 17TH STREET #1000

City: DENVER State: CO Zip: 80202

Contact Name and Telephone:

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

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

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

Additional Operator Contact:

Contact Name

Phone

Email

Amato, Joseph

719-845-2110/719-859-2263

josephamato@tcenergy.us

Santistevan, Vince

719-845-2102/719-680-9705

vincasantistevan@tcenergy.us

COGCC INSPECTION SUMMARY:

FIR Document Number: 688401103

Inspection Date: 01/18/2019

FIR Submit Date: 01/18/2019

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

Inspected Operator Information:

Company Name: TIMBER CREEK OPERATING LLC

Company Number: 10672

Address: 1001 17TH STREET #1000

City: DENVER State: CO Zip: 80202

LOCATION - Location ID: 308409

Location Name: GOLDEN EAGLE-633S67W Number: 28SESE County: LAS ANIMAS

Qtrqtr: SESE Sec: 28 Twp: 33S Range: 67W Meridian: 6

Latitude: 37.138560 Longitude: -104.885170

FACILITY - API Number: 05-071- -00 Facility ID: 271279

Facility Name: GOLDEN EAGLE Number: 28-16

Qtrqtr: SESE Sec: 28 Twp: 33S Range: 67W Meridian: 6

Latitude: 37.138560 Longitude: -104.885170

CORRECTIVE ACTIONS:

2 CA# 121858

Corrective Action: Securely fasten all valves, pipes, and fittings to ensure good mechanical condition, inspect at regular intervals and maintain in good mechanical condition per Rule 605.d.

Date: 01/19/2019

Response: CA COMPLETED

Date of Completion: 01/19/2019

Operator Comment: Packing repaired

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

COGCC  
Representative:

**OPERATOR COMMENT AND SUBMITTAL**

Comment: Partial CA submittal. Repaired Packing

I hereby certify that the statements made in this form are, to the best of my knowledge, true, correct, and complete.

Print Name: Joseph Amato

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

Title: Regulatory Manager

Date: 1/22/2019 3:53:27 PM

**ATTACHMENT LIST**

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

**Document Number**      **Description**

401913980	WH packing picture
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Total Attach: 1 Files