

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:

401914908

Date Received:

01/23/2019

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: 52530

Name of Operator: MAGPIE OPERATING, INC

Address: 2707 SOUTH COUNTY RD 11

City: LOVELAND State: CO Zip: 80537

Contact Name and Telephone:

Name: _____

Phone: () _____ Fax: () _____

Email: _____

Additional Operator Contact:

Contact Name	Phone	Email
<u>Burn, Diana</u>		<u>diana.burn@state.co.us</u>
<u>Pesicka, Conor</u>		<u>conor.pesicka@state.co.us</u>
<u>Warner, Ryan</u>	<u>970-669-6308</u>	<u>magpieoil@yahoo.com</u>
		<u>dnr_cogccengineering@state.co.us</u>

COGCC INSPECTION SUMMARY:

FIR Document Number: 674300979

Inspection Date: 10/31/2018

FIR Submit Date: 10/31/2018

FIR Status: _____

Inspected Operator Information:

Company Name: MAGPIE OPERATING, INC

Company Number: 52530

Address: 2707 SOUTH COUNTY RD 11

City: LOVELAND State: CO Zip: 80537

LOCATION - Location ID: 307190

Location Name: ANDERSON-65N68W Number: 32SESW County: _____

Qtrqtr: SESW Sec: 32 Twp: 5N Range: 68W Meridian: 6

Latitude: 40.351094 Longitude: -105.033339

FACILITY - API Number: 05-069-00 Facility ID: 307190

Facility Name: ANDERSON-65N68W Number: 32SESW

Qtrqtr: SESW Sec: 32 Twp: 5N Range: 68W Meridian: 6

Latitude: 40.351094 Longitude: -105.033339

CORRECTIVE ACTIONS:

1 CA# 120045

Corrective Action: Contact dnr_cogccengineering@state.co.us with resolution plan.

Date: 11/15/2018

Response: CA COMPLETED

Date of Completion: 01/22/2019

MIT has been completed.

Operator
Comment:

COGCC Decision:

COGCC
Representative:

OPERATOR COMMENT AND SUBMITTAL

Comment: Magpie has been in continuous contact with Tom Peterson. Rig broke down on site. Action had been delayed due to equipment repair and part availability.

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

Print Name: Ryan Warner

Signed:

Title: Vice President

Date: 1/23/2019 12:12:19 PM

ATTACHMENT LIST

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

Document Number **Description**

401914918	Anderson 2 MIT
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Total Attach: 1 Files