

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:

401946032

Date Received:

02/21/2019

FIR RESOLUTION FORM

Overall Status: CAC

CA Summary:

2 of 2 CAs from the FIR responded to on this Form

2 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
<u>Amato, Joseph</u>	<u>719-845-2110/719-859-2263</u>	<u>josephamato@tcenergy.us</u>

COGCC INSPECTION SUMMARY:

FIR Document Number: 688401122

Inspection Date: 01/19/2019

FIR Submit Date: 01/19/2019

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: 312007

Location Name: GOLDEN EAGLE MINE-633S67W Number: 29NESW County: LAS ANIMAS

Qtrqtr: NESW Sec: 29 Twp: 33S Range: 67W Meridian: 6

Latitude: 37.140901 Longitude: -104.911160

FACILITY - API Number: 05-071-00 Facility ID: 288304

Facility Name: GOLDEN EAGLE Number: 29-11

Qtrqtr: NESW Sec: 29 Twp: 33S Range: 67W Meridian: 6

Latitude: 37.140901 Longitude: -104.911160

CORRECTIVE ACTIIONS:

1 CA# 121924

Corrective Action: Comply with Rule 603.f .

Date: 02/02/2019

Response: CA COMPLETED

Date of Completion: 02/01/2019

Operator Comment: Unused poly pipe has been removed from the location.

COGCC Decision: _____

COGCC
Representative:

2 CA# 121925

Corrective Action: Comply with COGCC rule 1002 f

Date: 02/19/2019

Response: CA COMPLETED

Date of Completion: 02/20/2019

Operator Comment: Sediment and vegetation has been removed from the pit. The dirt berm has been dominated around the pit to stop sediment transfer.

COGCC Decision:

COGCC
Representative:

OPERATOR COMMENT AND SUBMITTAL

Comment: CA's completed for this location.

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: 2/21/2019 3:45:11 PM

ATTACHMENT LIST

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

<u>Document Number</u>	<u>Description</u>
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401947642	Location photo
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Total Attach: 1 Files