

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:

401994987

Date Received:

04/08/2019

FIR RESOLUTION FORM

Overall Status: CAC

CA Summary:

4 of 4 CAs from the FIR responded to on this Form

4 CA Completed
0 Factual Review Request

OPERATOR INFORMATION

OGCC Operator Number: 10133
Name of Operator: HILCORP ENERGY COMPANY
Address: P O BOX 61229
City: HOUSTON State: TX Zip: 77208

Contact Name and Telephone:
Name:
Phone: () Fax: ()
Email:

Additional Operator Contact:

Contact Name	Phone	Email
Shorty, Priscilla		pshorty@hilcorp.com
Ray, Mandi	505-324-5122	mray@hilcorp.com
Labowskie, Steve		steve.labowskie@state.co.us

COGCC INSPECTION SUMMARY:

FIR Document Number: 687903836
Inspection Date: 03/06/2019 FIR Submit Date: 03/06/2019 FIR Status:

Inspected Operator Information:

Company Name: HILCORP ENERGY COMPANY Company Number: 10133
Address: P O BOX 61229
City: HOUSTON State: TX Zip: 77208

LOCATION - Location ID: 312052

Location Name: ANIMAS 34-10-M34N10W Number: 36NWSE County: LA PLATA
Qtrqtr: NWSE Sec: 36 Twp: 34N Range: 10W Meridian: M
Latitude: 37.144340 Longitude: -107.881820

FACILITY - API Number: 05-067-00 Facility ID: 297003

Facility Name: ANIMAS 34-10 Number: 36-1A
Qtrqtr: NWSE Sec: 36 Twp: 34N Range: 10W Meridian: M
Latitude: 37.144340 Longitude: -107.881820

CORRECTIVE ACTIONS:

1 CA# 122970

Corrective Action: Please comply with Rule 907.e. Date: 04/05/2019

Response: CA COMPLETED Date of Completion: 03/07/2019

Operator Comment: Staining of soil removed

COGCC Decision: _____

COGCC
Representative:

2 CA# 122971

Corrective Action:

Date: 04/05/2019

Response: CA COMPLETED

Date of Completion: 03/07/2019

Operator
Comment:

COGCC Decision: _____

COGCC
Representative:

3 CA# 122972

Corrective Action:

Date: 04/05/2019

Response: CA COMPLETED

Date of Completion: 03/07/2019

Operator
Comment:

COGCC Decision: _____

COGCC
Representative:

4 CA# 122973

Corrective Action:

Date: 04/05/2019

Response: CA COMPLETED

Date of Completion: 03/07/2019

Operator
Comment:

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: Amanda Walker

Signed: _____

Title: Operation/Regulatory Tech

Date: 4/8/2019 2:14:46 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>
401995028	Removed Unused Equipment
401995031	Removed Unused Equipment
401995035	Removed Unused Equipment
401999983	Corrected Sign
401999987	Soil cleaned

Total Attach: 5 Files