

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:

402011610

Date Received:

04/17/2019

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: 10112  
Name of Operator: FOUNDATION ENERGY MANAGEMENT LLC  
Address: 5057 KELLER SPRINGS RD STE 650  
City: ADDISON State: TX Zip: 75001

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

Additional Operator Contact:

Contact Name: Daniel Lapp  
Phone: 970-629-9525  
Email: regulatory@foundationenergy.com

COGCC INSPECTION SUMMARY:

FIR Document Number: 679703392  
Inspection Date: 03/14/2019 FIR Submit Date: 03/15/2019 FIR Status:

Inspected Operator Information:

Company Name: FOUNDATION ENERGY MANAGEMENT LLC Company Number: 10112  
Address: 5057 KELLER SPRINGS RD STE 650  
City: ADDISON State: TX Zip: 75001

LOCATION - Location ID: 315479

Location Name: ROCK CANYON FED-64S101W Number: 34SENE County: RIO BLANCO  
Qtrqtr: SENE Sec: 34 Twp: 4S Range: 101W Meridian: 6  
Latitude: 39.657320 Longitude: -108.708220

FACILITY - API Number: 05-103-00 Facility ID: 230899

Facility Name: ROCK CANYON FED Number: 9-34-4-101  
Qtrqtr: SENE Sec: 34 Twp: 4S Range: 101W Meridian: 6  
Latitude: 39.657320 Longitude: -108.708220

CORRECTIVE ACTIIONS:

1 CA# 123241

Corrective Action: Instll sign to comply with Rule 210.d. Date: 02/22/2019

Response: CA COMPLETED Date of Completion: 04/12/2019

Operator Comment: Installed nearest public road sign and replaced operator sign

COGCC Decision:

COGCC  
Representative:

2 CA# 123242

Corrective Action: Install sign to comply with Rule 210.b.

Date: 02/22/2019

Response: CA COMPLETED

Date of Completion: 04/12/2019

Operator: New 210 bbl tank label  
Comment: New 40 bbl tank label  
All 4 dead men are marked with T post

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: Alyssa Beard

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

Title: HSE Manager

Date: 4/17/2019 8:58:11 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>
402011626	Rock Canyon 9-34
402011631	Rock Canyon 9-34
402011633	Rock Canyon 9-34
402011634	Rock CAnyon 9-34

Total Attach: 4 Files