

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:
402069244
Date Received:
06/10/2019

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: 46685
Name of Operator: KINDER MORGAN CO2 CO LP
Address: 1001 LOUISIANA ST SUITE 1000
City: HOUSTON State: TX Zip: 77002
Contact Name and Telephone:
Name: _____
Phone: () _____ Fax: () _____
Email: _____

Additional Operator Contact:

Contact Name	Phone	Email
<u>.General</u>		<u>CO2Source_Regulatory@kindermorgan.com</u>

COGCC INSPECTION SUMMARY:

FIR Document Number: 693900366
Inspection Date: 05/20/2019 FIR Submit Date: 06/03/2019 FIR Status: _____

Inspected Operator Information:

Company Name: KINDER MORGAN CO2 CO LP Company Number: 46685
Address: 1001 LOUISIANA ST SUITE 1000
City: HOUSTON State: TX Zip: 77002

LOCATION - Location ID: 322128

Location Name: DOE CANYON-N40N18W Number: 13SESE County: DOLORES
Qtrqtr: SESE Sec: 13 Twp: 40N Range: 18W Meridian: N
Latitude: 37.728890 Longitude: -108.786560

FACILITY - API Number: 05-033-00 Facility ID: 291646

Facility Name: DOE CANYON Number: 8
Qtrqtr: SESE Sec: 13 Twp: 40N Range: 18W Meridian: N
Latitude: 37.728890 Longitude: -108.786560

CORRECTIVE ACTIONS:

1 CA# 125777

Corrective Action: Additional stormwater controls need to be installed to stabilize erosion within the project area. Date: 07/03/2019

Response: CA COMPLETED Date of Completion: 06/03/2019

Operator Comment: Kinder Morgan CO2 Company, LP completed the Corractive Action item on 6/3/2019 per the attached photo documentation.

COGCC Decision: _____

COGCC
Representative:

OPERATOR COMMENT AND SUBMITTAL

Comment: Kinder Morgan CO2 Company, LP completed the Corrractive Action item on 6/3/2019 per the attached photo documentation.

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

Print Name: Chris Lopez

Signed: _____

Title: EHS Specialist

Date: 6/10/2019 12:24:09 PM

ATTACHMENT LIST

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

Document Number **Description**

402069371	Photos
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Total Attach: 1 Files