

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:
402203067

Date Received:
10/08/2019

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: 46290
Name of Operator: KP KAUFFMAN COMPANY INC
Address: 1675 BROADWAY, STE 2800
City: DENVER State: CO Zip: 80202

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

Additional Operator Contact:

Contact Name	Phone	Email
<u>Susana Lara-Mesa</u>	<u>303-825-4822</u>	<u>slaramesa@kpk.com</u>

COGCC INSPECTION SUMMARY:

FIR Document Number: 693501183
Inspection Date: 08/26/2019 FIR Submit Date: 08/26/2019 FIR Status: _____

Inspected Operator Information:

Company Name: KP KAUFFMAN COMPANY INC Company Number: 46290
Address: 1675 BROADWAY, STE 2800
City: DENVER State: CO Zip: 80202

LOCATION - Location ID: 333124

Location Name: NESSSU-KINDER-62N66W Number: 20NESE County: WELD
Qtrqtr: NESE Sec: 20 Twp: 2N Range: 66W Meridian: 6
Latitude: 40.121920 Longitude: -104.794070

FACILITY - API Number: 05-123-00 Facility ID: 240925

Facility Name: NESSSU-KINDER Number: 16
Qtrqtr: NESE Sec: 20 Twp: 2N Range: 66W Meridian: 6
Latitude: 40.121920 Longitude: -104.794070

CORRECTIVE ACTIIONS:

1 CA# 129663

Corrective Action: Securely fasten all valves, pipes, and fittings to ensure good mechanical condition, inspect at regular intervals and maintain in good mechanical condition per Rule 605.d.

Date: 08/27/2019

Response: CA COMPLETED Date of Completion: 10/07/2019

Operator Comment: The issue has been fixed. Please see attached picture.

COGCC Decision: _____

COGCC
Representative:

2 CA# 129664

Corrective Action: Comply with rule 603 f

Date: 09/09/2019

Response: CA COMPLETED

Date of Completion: 10/07/2019

Operator
Comment:

Weeds have been removed from all location. Please see attached pictures.

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: Steve Hamilton

Signed: _____

Title: Field Supervisor

Date: 10/8/2019 1:49:27 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>
402203171	CA PIC1
402203175	CA PIC2
402203176	CA PIC3

Total Attach: 3 Files