

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:  
402241486

Date Received:  
11/18/2019

**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: 16700

Name of Operator: CHEVRON USA INC

Address: 100 CHEVRON USA INC

City: RANGELY State: CO Zip: 81648

Contact Name and Telephone:

Name: \_\_\_\_\_

Phone: ( ) \_\_\_\_\_ Fax: ( ) \_\_\_\_\_

Email: \_\_\_\_\_

Additional Operator Contact:

Contact Name

Phone

Email

Patterson, Chris

970 675 3814

SPWU@chevron.com

Sanford, Anita

970-675-3842

atlx@chevron.com

**COGCC INSPECTION SUMMARY:**

FIR Document Number: 692401243

Inspection Date: 07/31/2019

FIR Submit Date: 08/23/2019

FIR Status: \_\_\_\_\_

**Inspected Operator Information:**

Company Name: CHEVRON USA INC

Company Number: 16700

Address: 100 CHEVRON USA INC

City: RANGELY State: CO Zip: 81648

**LOCATION - Location ID: 397970**

Location Name: FEE-62N102W Number: 29NENE County: RIO BLANCO

Qtrqtr: NENE Sec: 29 Twp: 2N Range: 102W Meridian: 6

Latitude: 40.120910 Longitude: -108.857800

**FACILITY - API Number: 05-103-00 Facility ID: 230825**

Facility Name: FEE Number: 119X

Qtrqtr: NENE Sec: 29 Twp: 2N Range: 102W Meridian: 6

Latitude: 40.120910 Longitude: -108.857800

**CORRECTIVE ACTIONS:**

**1** CA# 129623

Corrective Action: Assess vegetation and site conditions; re-seeding, applying remedies as indicated by assessment, to ensure the uniform establishment across the site of desirable vegetation. Reclamation Activities to be complete by November 15, 2019. Continue to monitor & manage the site until Location is Passed for Final Reclamation.

Date: 11/15/2019

Response: CA COMPLETED

Date of Completion: 09/09/2019

Operator  
Comment:

Completed through Chevron Work Order System and Chevron Area Planner for Colorado.

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: CHris Patterson

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

Title: HES Specialist

Date: 11/18/2019 8:56:24 AM

**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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Total Attach: 0 Files