

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:  
402285631

Date Received:  
01/14/2020

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: 10531

Name of Operator: GRIZZLY OPERATING LLC

Address: 5847 SAN FELIPE #3000

City: HOUSTON State: TX Zip: 77057

Contact Name and Telephone:

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

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

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

Additional Operator Contact:

Contact Name	Phone	Email
.Grizzly		sghan@grizzlyenergyllc.com
.Grizzly		aaxelson@grizzlyenergyllc.com
.Grizzly		scollett@grizzlyenergyllc.com

COGCC INSPECTION SUMMARY:

FIR Document Number: 694901043

Inspection Date: 01/06/2020

FIR Submit Date: 01/06/2020

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

Inspected Operator Information:

Company Name: GRIZZLY OPERATING LLC

Company Number: 10531

Address: 5847 SAN FELIPE #3000

City: HOUSTON State: TX Zip: 77057

LOCATION - Location ID: 335083

Location Name: GUCCINI-66S92W Number: 20NWNE County: \_\_\_\_\_

Qtrqtr: NWNE Sec: 20 Twp: 6S Range: 92W Meridian: 6

Latitude: 39.517130 Longitude: -107.687450

FACILITY - API Number: 05-045-00 Facility ID: 335083

Facility Name: GUCCINI-66S92W Number: 20NWNE

Qtrqtr: NWNE Sec: 20 Twp: 6S Range: 92W Meridian: 6

Latitude: 39.517130 Longitude: -107.687450

CORRECTIVE ACTIONS:

1 CA# 135717

Corrective Action: Comply with Rule 603.f .

Date: 02/06/2020

Response: CA COMPLETED

Date of Completion: 01/13/2020

Operator Comment: All the materials and equipment observed during the recent COGCC inspection have been removed from the location, except those necessary to support lease operations or the operations associated with the separator sand storage facility. Please see the attached photo. The pallets in the attached photo have since been removed from the location.

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: Scott Ghan

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

Title: Senior EHS Specialist

Date: 1/14/2020 2:29:04 PM

**ATTACHMENT LIST**

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

**Document Number**      **Description**

402285646	CA Completion Photo
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Total Attach: 1 Files