

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:

402410609

Date Received:

06/01/2020

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: 69175

Name of Operator: PDC ENERGY INC

Address: 1775 SHERMAN STREET - STE 3000

City: DENVER State: CO Zip: 80203

Contact Name and Telephone:

Name: _____

Phone: () _____ Fax: () _____

Email: _____

Additional Operator Contact:

Contact Name

Phone

Email

Tyranny Bergin

970-313-5547

EHSCOGCCInspections@pdce.com

COGCC INSPECTION SUMMARY:

FIR Document Number: 689501050

Inspection Date: 05/18/2020

FIR Submit Date: 05/19/2020

FIR Status: _____

Inspected Operator Information:

Company Name: SRC ENERGY INC

Company Number: 10311

Address: 1675 BROADWAY SUITE 2600

City: DENVER State: CO Zip: 80202

LOCATION - Location ID: 433548

Location Name: Phelps Number: 12-32NHZ County: _____

Qtrqr: SENE Sec: 32 Twp: 1N Range: 66W Meridian: 6

Latitude: 40.011110 Longitude: -104.792750

FACILITY - API Number: 05-123-00 Facility ID: 453141

Facility Name: Phelps Number: 12-32NHZ

Qtrqr: SENE Sec: 32 Twp: 1N Range: 66W Meridian: 6

Latitude: 40.011110 Longitude: -104.792750

CORRECTIVE ACTIONS:

1 CA# 139164

Corrective Action: Submit a Supplemental Form 19 including a closure request and supporting documentation. If closure of this spill cannot be completed by corrective action deadline then a Form 27 Site Investigation and Remediation Workplan shall be created for this spill.

Date: 07/02/2020

Response: CA COMPLETED

Date of Completion: 05/26/2020

Operator
Comment:

Form 19 has been submitted and approved, Doc. # 402402654. CA has been completed.

COGCC Decision: _____

COGCC
Representative:

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OPERATOR COMMENT AND SUBMITTAL

Comment: Form 19 has been submitted and approved, Doc. # 402402654. CA has been completed.

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

Print Name: Tyranny Bergin

Signed: _____

Title: EHS Coordinator

Date: 6/1/2020 7:06:04 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>
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Total Attach: 0 Files