

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:

402420686

Date Received:

06/12/2020

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: 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: 697001079

Inspection Date: 04/21/2020

FIR Submit Date: 04/21/2020

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: 310887

Location Name: CAMENISCH-SUPREME Number: 4SENE County: _____
CAMP-64N66W

Qtrqtr: SENE Sec: 4 Twp: 4N Range: 66W Meridian: 6

Latitude: 40.343860 Longitude: -104.776170

FACILITY - API Number: 05-123- -00 Facility ID: 310887

Facility Name: CAMENISCH-SUPREME Number: 4SENE
CAMP-64N66W

Qtrqtr: SENE Sec: 4 Twp: 4N Range: 66W Meridian: 6

Latitude: 40.343860 Longitude: -104.776170

CORRECTIVE ACTIONS:

1 CA# 138199

Corrective Action: Install sign to comply with Rule 210.e.

Date: 07/22/2020

Response: CA COMPLETED

Date of Completion: 06/09/2020

Operator Comment: Signs have been updated. CA complete.

COGCC Decision: _____

COGCC
Representative:

2 CA# 138200

Corrective Action: Install sign to comply with Rule 210.e.

Date: 07/22/2020

Response: CA COMPLETED

Date of Completion: 06/09/2020

Operator
Comment: Signs have been updated. CA complete.

COGCC Decision: _____

COGCC
Representative:

OPERATOR COMMENT AND SUBMITTAL

Comment: Signs have been updated. CA's complete.

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: 6/12/2020 12:16:49 PM

ATTACHMENT LIST

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

Document Number **Description**

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Total Attach: 0 Files