

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:

402443596

Date Received:

07/15/2020

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: 10261
Name of Operator: BAYSWATER EXPLORATION & PRODUCTION LLC
Address: 730 17TH ST STE 500
City: DENVER State: CO Zip: 80202

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

Additional Operator Contact:

Contact Name	Phone	Email
<u>Mark Brown</u>	<u>303-893-2503</u>	<u>mbrown@bayswater.us</u>

COGCC INSPECTION SUMMARY:

FIR Document Number: 697501738
Inspection Date: 07/13/2020 FIR Submit Date: 07/14/2020 FIR Status: _____

Inspected Operator Information:

Company Name: BAYSWATER EXPLORATION & PRODUCTION LLC Company Number: 10261
Address: 730 17TH ST STE 500
City: DENVER State: CO Zip: 80202

LOCATION - Location ID: 438887

Location Name: Mead Number: 9-E County: _____
Qtrqr: SENE Sec: 9 Twp: 7N Range: 66W Meridian: 6
Latitude: 40.592778 Longitude: -104.774448

FACILITY - API Number: 05-123-00 Facility ID: 438887

Facility Name: Mead Number: 9-E
Qtrqr: SENE Sec: 9 Twp: 7N Range: 66W Meridian: 6
Latitude: 40.592778 Longitude: -104.774448

CORRECTIVE ACTION:

1 CA# 140421

Corrective Action: Operator shall post a copy of the approved Form 2A on the location during all construction, drilling, and well completion activities.
The corrective date is the date the location was observed out of compliance.

Date: 07/13/2020

Response: CA COMPLETED Date of Completion: 07/14/2020

Operator Comment: Form 2A & All Form 2s were posted on location in plastic container attached to T-Post on 7/14/2020. See attached picture.

COGCC Decision: _____

COGCC
Representative:

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OPERATOR COMMENT AND SUBMITTAL

Comment: Form 2A & Form 2 Permits are now on location.

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

Print Name: Mark Brown

Signed: _____

Title: Operations Manager

Date: 7/15/2020 7:14:52 AM

ATTACHMENT LIST

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

Document Number **Description**

402443598	Mead 9-E Pad Permit Box
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Total Attach: 1 Files