

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:  
402466606

Date Received:  
08/14/2020

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: 10112  
Name of Operator: FOUNDATION ENERGY MANAGEMENT LLC  
Address: 5057 KELLER SPRINGS RD STE 650  
City: ADDISON State: TX Zip: 75001  
Contact Name and Telephone:  
Name: \_\_\_\_\_  
Phone: ( ) \_\_\_\_\_ Fax: ( ) \_\_\_\_\_  
Email: \_\_\_\_\_

Additional Operator Contact:

Contact Name	Phone	Email
<u>Energy, Foundation</u>		<u>regulatory@foundationenergy.com</u>
<u>Thompson, Bud</u>		<u>BLThomps@BLM.gov</u>

COGCC INSPECTION SUMMARY:

FIR Document Number: 700402466  
Inspection Date: 07/17/2020 FIR Submit Date: 07/18/2020 FIR Status: \_\_\_\_\_

Inspected Operator Information:

Company Name: FOUNDATION ENERGY MANAGEMENT LLC Company Number: 10112  
Address: 5057 KELLER SPRINGS RD STE 650  
City: ADDISON State: TX Zip: 75001

LOCATION - Location ID: 316391

Location Name: COLUMBINE SP FED-64S104W Number: 13SESW County: RIO BLANCO  
Qtrqr: SESW Sec: 13 Twp: 4S Range: 104W Meridian: 6  
Latitude: 39.705670 Longitude: -109.024050

FACILITY - API Number: 05-103-00 Facility ID: 272001

Facility Name: COLUMBINE SP FED Number: 3C-13-4-104  
Qtrqr: SESW Sec: 13 Twp: 4S Range: 104W Meridian: 6  
Latitude: 39.705670 Longitude: -109.024050

CORRECTIVE ACTIONS:

1 CA# 140556

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

Date: 09/18/2020

Response: CA COMPLETED

Date of Completion: 08/13/2020

Operator Comment: Nearest public road is now displayed on sign.

COGCC Decision: \_\_\_\_\_

COGCC  
Representative:

**2** CA# 140557

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

Date: 09/18/2020

Response: CA COMPLETED

Date of Completion: 08/13/2020

Operator  
Comment:

Wellhead sign installed.

COGCC Decision: \_\_\_\_\_

COGCC  
Representative:

OPERATOR COMMENT AND SUBMITTAL

Comment: Corrective actions completed.

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

Print Name: Afton Iiams

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

Title: HSE/Regulatory Technician

Date: 8/14/2020 8:22:32 AM

**ATTACHMENT LIST**

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

**Document Number**      **Description**

402466619	Location Photo
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Total Attach: 1 Files