

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:

402480952

Date Received:

09/02/2020

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: 679603119

Inspection Date: 07/27/2020

FIR Submit Date: 07/27/2020

FIR Status: _____

Inspected Operator Information:

Company Name: PDC ENERGY INC

Company Number: 69175

Address: 1775 SHERMAN STREET - STE 3000

City: DENVER State: CO Zip: 80203

LOCATION - Location ID: 306589

Location Name: HEINRICY-65N67W Number: 7NWNW County: WELD

Qtrqr: NWN Sec: 7 Twp: 5N Range: 67W Meridian: 6
W

Latitude: 40.420140 Longitude: -104.942110

FACILITY - API Number: 05-123- -00 Facility ID: 289922

Facility Name: HEINRICY Number: 11-7U

Qtrqr: NWN Sec: 7 Twp: 5N Range: 67W Meridian: 6
W

Latitude: 40.420140 Longitude: -104.942110

CORRECTIVE ACTIONS:

1 CA# 140745

Corrective Action: Conduct maintenance on equipment, cleanup stained material and review self inspection processes per Rule 1002.f.(2).d

Date: 08/27/2020

Response: CA COMPLETED

Date of Completion: 09/02/2020

Operator Comment: Work requested has been done. CA complete.

COGCC Decision: _____

COGCC
Representative:

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2 CA# 140746

Corrective Action: Comply with Rule 603.f.

Date: 08/27/2020

Response: CA COMPLETED

Date of Completion: 09/02/2020

Operator
Comment:

Work requested has been done. CA complete.

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COGCC Decision: _____

COGCC
Representative:

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OPERATOR COMMENT AND SUBMITTAL

Comment: Work requested has been done. CA's complete.

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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: 9/2/2020 2:54:23 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