

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:
402519269

Date Received:
10/29/2020

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: 47120
Name of Operator: KERR MCGEE OIL & GAS ONSHORE LP
Address: P O BOX 173779
City: DENVER State: CO Zip: 80217-3779
Contact Name and Telephone:
Name: _____
Phone: () _____ Fax: () _____
Email: _____

Additional Operator Contact:

Contact Name	Phone	Email
<u>Callie Fiddes</u>	<u>720-929-4361</u>	<u>Callie.Fiddes@Oxy.com</u>

COGCC INSPECTION SUMMARY:

FIR Document Number: 697001698
Inspection Date: 07/23/2020 FIR Submit Date: 07/23/2020 FIR Status: _____

Inspected Operator Information:

Company Name: KERR MCGEE OIL & GAS ONSHORE LP Company Number: 47120
Address: P O BOX 173779
City: DENVER State: CO Zip: 80217-3779

LOCATION - Location ID: 332165

Location Name: RUBY O-64N67W Number: 15SWSE County: _____
Qtrqr: SWSE Sec: 15 Twp: 4N Range: 67W Meridian: 6
Latitude: 40.307469 Longitude: -104.875404

FACILITY - API Number: 05-123- -00 Facility ID: 332165

Facility Name: RUBY O-64N67W Number: 15SWSE
Qtrqr: SWSE Sec: 15 Twp: 4N Range: 67W Meridian: 6
Latitude: 40.307469 Longitude: -104.875404

CORRECTIVE ACTIONS:

1 CA# 140690

Corrective Action: Perform successful mechanical integrity test. If a successful MIT can not be performed within 90 day CA time the well must be plugged within 3 months per Rule 326 and 208. Date: 10/26/2020

Response: CA COMPLETED Date of Completion: 10/29/2020

Operator Comment: This well is currently being plugged. The form 6 notice of intent was submitted 9/22/2020 (doc #402492312). A subsequent report will be soon to follow up.

COGCC Decision: _____

COGCC
Representative:

OPERATOR COMMENT AND SUBMITTAL

Comment: This well is currently being plugged. A form 6 reporting the completed work will soon be submitted.

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

Print Name: Callie Fiddes

Signed: _____

Title: Regulatory Analyst

Date: 10/29/2020 8:17:16 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