

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:  
402539071

Date Received:  
11/24/2020

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: 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>regulatory@foundationenergy.com</u>

COGCC INSPECTION SUMMARY:

FIR Document Number: 696201879  
Inspection Date: 10/06/2020 FIR Submit Date: 10/09/2020 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: 315190

Location Name: TAIGA FED-64S102W Number: 20NWSW County: \_\_\_\_\_  
Qtrqr: NWS Sec: 20 Twp: 4S Range: 102W Meridian: 6  
W  
Latitude: 39.683041 Longitude: -108.872781

FACILITY - API Number: 05-103-00 Facility ID: 315190

Facility Name: TAIGA FED-64S102W Number: 20NWSW  
Qtrqr: NWS Sec: 20 Twp: 4S Range: 102W Meridian: 6  
W  
Latitude: 39.683041 Longitude: -108.872781

CORRECTIVE ACTIONS:

1 CA# 142654

Corrective Action: Comply with COGCC 1004 rules; Conduct final reclamation activities including, but not limited to, removal or riser surface equipment, removal of gravel, compaction alleviation, contouring/regrading and revegetation activities. Ensure erosion controls are implemented to stabilize the seeded soil, and continue to monitor and manage this site until Final Reclamation has passed.

Date: 11/15/2020

Response: CA COMPLETED Date of Completion: 11/05/2020

Final reclamation work has been conducted at this location- see attached photos.

Operator \_\_\_\_\_  
Comment: \_\_\_\_\_

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

COGCC Representative: \_\_\_\_\_

OPERATOR COMMENT AND SUBMITTAL

Comment: Corrective action has been 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: 11/24/2020 10:41:09 AM

**ATTACHMENT LIST**

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

<u>Document Number</u>	<u>Description</u>
402539082	Location Photos

Total Attach: 1 Files