

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:
402548723

Date Received:
12/08/2020

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: 10110

Name of Operator: GREAT WESTERN OPERATING COMPANY LLC

Address: 1001 17TH STREET #2000

City: DENVER State: CO Zip: 80202

Contact Name and Telephone:

Name: _____

Phone: () _____ Fax: () _____

Email: _____

Additional Operator Contact:

Contact Name

KELLY PALUCH

Phone

970-364-2812

Email

cogccinspections@gwogco.com

COGCC INSPECTION SUMMARY:

FIR Document Number: 696103833

Inspection Date: 10/12/2020

FIR Submit Date: 10/13/2020

FIR Status: _____

Inspected Operator Information:

Company Name: GREAT WESTERN OPERATING COMPANY LLC

Company Number: 10110

Address: 1001 17TH STREET #2000

City: DENVER State: CO Zip: 80202

LOCATION - Location ID: 435903

Location Name: Bruegman South EG Pad Number: 34-021HN County: _____

Qtrqr: SWS Sec: 34 Twp: 7N Range: 64W Meridian: 6
W

Latitude: 40.523675 Longitude: -104.544478

FACILITY - API Number: 05-123- -00 Facility ID: 435903

Facility Name: Bruegman South EG Pad Number: 34-021HN

Qtrqr: SWS Sec: 34 Twp: 7N Range: 64W Meridian: 6
W

Latitude: 40.523675 Longitude: -104.544478

CORRECTIVE ACTIONS:

1 CA# 142694

Corrective Action: Post Company, & Well name(s) at battery site. Comply w/ Rule 210.b. See photo #4.

Date: 12/14/2020

Response: CA COMPLETED

Date of Completion: 12/08/2020

Operator
Comment:

CORRECTIVE ACTION COMPLETED - SEE ATTACHED PHOTO (S)

COGCC Decision: _____

COGCC
Representative: _____

2 CA# 142695

Corrective Action: Post Emergency contact number at battery site. Comply w/ Rule 210.b.
See photo #4.

Date: 11/12/2020

Response: CA COMPLETED

Date of Completion: 12/08/2020

Operator
Comment:

CORRECTIVE ACTION COMPLETED - SEE ATTACHED PHOTO (S)

COGCC Decision: _____

COGCC
Representative: _____

OPERATOR COMMENT AND SUBMITTAL

Comment: _____

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

Print Name: KELLY PALUCH

Signed: _____

Title: SR. ADMIN ASSISTANT

Date: 12/8/2020 10:04:40 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>
402548726	PHOTO #1
402548727	PHOTO #2
402548728	PHOTO #3

Total Attach: 3 Files