

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:
402567907

Date Received:
01/06/2021

FIR RESOLUTION FORM

Overall Status: CAC

CA Summary:

2 of 3 CAs from the FIR responded to on this Form

2 CA Completed
0 Factual Review Request

OPERATOR INFORMATION

OGCC Operator Number: 10531
Name of Operator: GRIZZLY OPERATING LLC
Address: 5847 SAN FELIPE #3000
City: HOUSTON State: TX Zip: 77057
Contact Name and Telephone:
Name: _____
Phone: () _____ Fax: () _____
Email: _____

Additional Operator Contact:

Contact Name	Phone	Email
<u>.Grizzly</u>		<u>aaxelson@grizzlyenergyllc.com</u>
<u>.Grizzly</u>		<u>sghan@grizzlyenergyllc.com</u>

COGCC INSPECTION SUMMARY:

FIR Document Number: 700701989
Inspection Date: 12/08/2020 FIR Submit Date: 12/08/2020 FIR Status: _____

Inspected Operator Information:

Company Name: GRIZZLY OPERATING LLC Company Number: 10531
Address: 5847 SAN FELIPE #3000
City: HOUSTON State: TX Zip: 77057

LOCATION - Location ID: 322510

Location Name: MOBILE-66S92W Number: 20NESW County: _____
Qtrqtr: NESW Sec: 20 Twp: 6S Range: 92W Meridian: 6
Latitude: 39.509370 Longitude: -107.693624

FACILITY - API Number: 05-045-00 Facility ID: 322510

Facility Name: MOBILE-66S92W Number: 20NESW
Qtrqtr: NESW Sec: 20 Twp: 6S Range: 92W Meridian: 6
Latitude: 39.509370 Longitude: -107.693624

CORRECTIVE ACTIONS:

1 CA# 144942

Corrective Action: Remove or mark deadman Date: 01/08/2021

Response: CA COMPLETED Date of Completion: 12/25/2020

Operator Comment: Done

COGCC Decision: _____

COGCC Representative:			
2	CA# 144943		
Corrective Action:	Remove debris (steel cable) next to well head		Date: <u>01/08/2021</u>
Response:	CA COMPLETED		Date of Completion: <u>01/06/2021</u>
Operator Comment:	Done		
COGCC Decision:			
COGCC Representative:			

<u>OPERATOR COMMENT AND SUBMITTAL</u>	
Comment:	
<p>I hereby certify that the statements made in this form are, to the best of my knowledge, true, correct, and complete.</p> <p>Print Name: <u>Aaron Axelson</u> Signed: _____</p> <p>Title: <u>Superintendent</u> Date: <u>1/6/2021 1:43:29 PM</u></p>	

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>

Total Attach: 0 Files