

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:  
402567310

Date Received:  
01/06/2021

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: 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: 700701990  
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: 418555

Location Name: CB-TG Land NW Number: 11D-20-692 County: \_\_\_\_\_  
Qtrqtr: NWNE Sec: 20 Twp: 6S Range: 92W Meridian: 6  
Latitude: 39.517759 Longitude: -107.690269

FACILITY - API Number: 05-045-00 Facility ID: 418555

Facility Name: CB-TG Land NW Number: 11D-20-692  
Qtrqtr: NWNE Sec: 20 Twp: 6S Range: 92W Meridian: 6  
Latitude: 39.517759 Longitude: -107.690269

CORRECTIVE ACTIONS:

1 CA# 144945

Corrective Action: Maintain ALL BMP's  
Provide proof of tracking control BMP's Date: 01/08/2021

Response: CA COMPLETED Date of Completion: 01/06/2021

Operator Comment: This comment is specific to inspector's comment "erosion behind tank battery rilling is evident" and the associated CA. This specific CA associated with the alleged ersosion is not complete and cannot be completed by the assigned CA deadline due to seasonal weather conditions. The alleged erosion issue on the location will be addressed when onsite and winter weather conditions allow.

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: Scott Ghan

Signed: \_\_\_\_\_

Title: Senior EHS Specialist

Date: 1/6/2021 3:49:24 PM

**ATTACHMENT LIST**

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

**Document Number**      **Description**

<u>Document Number</u>	<u>Description</u>

Total Attach: 0 Files