

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:
402471176

Date Received:
08/19/2020

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: 10330
Name of Operator: INVESTMENT EQUIPMENT LLC
Address: 412 W PLATTE AVE
City: FT MORGAN State: CO Zip: 80701

Contact Name and Telephone:
Name: _____
Phone: () _____ Fax: () _____
Email: _____

Additional Operator Contact:

Contact Name	Phone	Email
<u>Chisholm, Jim</u>	<u>405-642-9437</u>	<u>investmentequipment@gmail.com</u>

COGCC INSPECTION SUMMARY:

FIR Document Number: 688308355
Inspection Date: 08/12/2020 FIR Submit Date: 08/14/2020 FIR Status: _____

Inspected Operator Information:

Company Name: INVESTMENT EQUIPMENT LLC Company Number: 10330
Address: 412 W PLATTE AVE
City: FT MORGAN State: CO Zip: 80701

LOCATION - Location ID: 316944

Location Name: DAVIS W T-63S51W Number: 30SWNE County: WASHINGTON
Qtrqtr: SWNE Sec: 30 Twp: 3S Range: 51W Meridian: 6
Latitude: 39.765504 Longitude: -103.130590

FACILITY - API Number: 05-121-00 Facility ID: 233377

Facility Name: DAVIS W T Number: 1
Qtrqtr: SWNE Sec: 30 Twp: 3S Range: 51W Meridian: 6
Latitude: 39.765504 Longitude: -103.130590

CORRECTIVE ACTIONS:

1 CA# 141231

Corrective Action: Comply with Rule 603.f . Date: 08/21/2020

Response: CA COMPLETED Date of Completion: 08/18/2020

Operator Comment: Weeds on location mowed and sprayed.

COGCC Decision: Approved

COGCC
Representative:

2 CA# 141232

Corrective Action: Install or repair wildlife protection equipment. Prevent any unauthorized discharge (specify condition if it is E&P waste, improper disposal, trash, etc.)

Date: 08/28/2020

Response: CA COMPLETED

Date of Completion: 08/18/2020

Operator
Comment: Replaced lid to valve box cover.

COGCC Decision: Approved pending re-inspection

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: Jim Chisholm

Signed: _____

Title: Manager / Member

Date: 8/19/2020 1:53:24 PM

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>
402471176	FIR RESOLUTION SUBMITTED

Total Attach: 1 Files