

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:  
402666058

Date Received:  
04/21/2021

FIR RESOLUTION FORM

Overall Status: CAC

CA Summary:

1 of 2 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: 697502612  
Inspection Date: 02/26/2021 FIR Submit Date: 03/08/2021 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: 323461

Location Name: SOONER UNIT-68N58W Number: 28NWNE County: \_\_\_\_\_  
Qtrqr: NWNE Sec: 28 Twp: 8N Range: 58W Meridian: 6  
Latitude: 40.638140 Longitude: -103.865680

FACILITY - API Number: 05-123-00 Facility ID: 323461

Facility Name: SOONER UNIT-68N58W Number: 28NWNE  
Qtrqr: NWNE Sec: 28 Twp: 8N Range: 58W Meridian: 6  
Latitude: 40.638140 Longitude: -103.865680

CORRECTIVE ACTIONS:

2 CA# 147205

Corrective Action: Comply with 1002.f; install or repair required BMPs in accordance with good engineering practices. Date: 04/12/2021

Response: CA COMPLETED Date of Completion: 04/16/2021

Operator Comment: Corrective action is completed, see attached photos.

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

COGCC  
Representative:

**OPERATOR COMMENT AND SUBMITTAL**

Comment: FIRR Doc ID: 402658006 was submitted for this inspection on 4/14/2021. This additional FIRR is being submitted with new photos taken by drone to show that work is 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: 4/21/2021 9:38:57 AM

**ATTACHMENT LIST**

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

**Document Number**      **Description**

402666093	Location Photos
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Total Attach: 1 Files