

State of Colorado
Oil and Gas Conservation Commission

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Document Number:
402685966

Date Received:
05/11/2021

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: 10351

Name of Operator: WAPITI OPERATING LLC

Address: 1310 W SAM HOUSTON PKWY N

City: HOUSTON State: TX Zip: 77043

Contact Name and Telephone:

Name: _____

Phone: () _____ Fax: () _____

Email: _____

Additional Operator Contact:

Contact Name

Phone

Email

MADISON RANDY

rmadison@wapitienergy.com

COGCC INSPECTION SUMMARY:

FIR Document Number: 690201404

Inspection Date: 04/12/2021

FIR Submit Date: 04/13/2021

FIR Status: _____

Inspected Operator Information:

Company Name: WAPITI OPERATING LLC

Company Number: 10351

Address: 1310 W SAM HOUSTON PKWY N

City: HOUSTON State: TX Zip: 77043

LOCATION - Location ID: 307697

Location Name: VPR C-635S66W Number: 5SENE County: LAS ANIMAS

Qtrqr: SENE Sec: 5 Twp: 35S Range: 66W Meridian: 6

Latitude: 37.028410 Longitude: -104.795020

FACILITY - API Number: 05-071- -00 Facility ID: 89235

Facility Name: VPR C Number: 4

Qtrqr: SENE Sec: 5 Twp: 35S Range: 66W Meridian: 6

Latitude: 37.028410 Longitude: -104.795020

CORRECTIVE ACTIONS:

1 CA# 149407

Corrective Action: Control and contain spills/releases and clean up per Rule 912..
Securely fasten all valves, pipes, and fittings to ensure good mechanical condition,
inspect
at regular intervals and maintain in good mechanical condition per Rule 608..

Date: 04/15/2021

Response: CA COMPLETED

Date of Completion: 04/15/2021

Operator Comment: Stuffing box packings tightened and stain cleaned up.

COGCC Decision: _____

COGCC Representative: _____

2 CA# 149408

Corrective Action: Install or repair required BMPs per Rule 1002.f.(2)C

Date: 05/14/2021

Response: CA COMPLETED

Date of Completion: 04/19/2021

Operator Comment:

Road was blade and left with no traffic so the road would pack and dry out to prevent erosion from wheel tracks.

COGCC Decision: _____

COGCC Representative: _____

OPERATOR COMMENT AND SUBMITTAL

Comment: No picture was taken when the work was completed. I am sure a re-inspect is needed. If a picture is need to approve the corrective action let me know. This is an amended FIRR for 4026559744.

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

Print Name: Randy L. Madison

Signed: _____

Title: HSE Specialist

Date: 5/11/2021 2:50:48 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