

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:

402734830

Date Received:

06/30/2021

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: 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

Labowskie, Steve

steve.labowskie@state.co.us

Contact, General

regulatory@foundationenergy.com

Browning, Chuck

970-433-4139

chuck.browning@state.co.us

COGCC INSPECTION SUMMARY:

FIR Document Number: 693801325

Inspection Date: 01/15/2020

FIR Submit Date: 01/17/2020

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: 322412

Location Name: FEDERAL-68S104W Number: 16NWNE County: GARFIELD

Qtrqtr: NWNE Sec: 16 Twp: 8S Range: 104W Meridian: 6

Latitude: 39.373256 Longitude: -108.991239

FACILITY - API Number: 05-045-

-00

Facility ID: 210441

Facility Name: FEDERAL Number: 31-16

Qtrqtr: NWNE Sec: 16 Twp: 8S Range: 104W Meridian: 6

Latitude: 39.373256 Longitude: -108.991239

CORRECTIVE ACTIONS:

1 CA# 136037

Corrective Action: Pit is being closed under approved F-27 (Doc# 401962561) with a date of commencement of Remediation of 6/3/2019. Inspector believes that the fence was removed for remediation activities. CA date set for completion of remediation, 10/7/2019 (Doc# 401962561).

Date: 10/07/2019

Response: CA COMPLETED

Date of Completion: 04/21/2020

Operator Comment: A Supplemental Form 27 (Doc ID: 402062530) was submitted 4/21/20 requesting closure of the pit on location, and the request for closure was approved by COGCC on 4/22/20.

COGCC Decision: _____

COGCC
Representative:

OPERATOR COMMENT AND SUBMITTAL

Comment: Corrective action has been 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: 6/30/2021 2:30:21 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>
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Total Attach: 0 Files