

State of Colorado
Oil and Gas Conservation Commission

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Document Number:
402759491

Date Received:
07/26/2021

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: 10396 Contact Name and Telephone:
Name of Operator: SWN PRODUCTION COMPANY LLC Name: _____
Address: P.O. BOX 12359 Phone: () _____ Fax: () _____
City: SPRING State: TX Zip: 77389 Email: _____

Additional Operator Contact:

Contact Name	Phone	Email
<u>Karen Maneotis</u>	<u>970-620-6099</u>	<u>karen_maneotis@swn.com</u>

COGCC INSPECTION SUMMARY:

FIR Document Number: 696202944
Inspection Date: 07/14/2021 FIR Submit Date: 07/16/2021 FIR Status: _____

Inspected Operator Information:

Company Name: SWN PRODUCTION COMPANY LLC Company Number: 10396
Address: P.O. BOX 12359
City: SPRING State: TX Zip: 77389

LOCATION - Location ID: 423345

Location Name: Weber Number: 32-4 County: _____
Qtrqr: SW Sec: 4 Twp: 6N Range: 92W Meridian: 6
NE
Latitude: 40.501175 Longitude: -107.722908

FACILITY - API Number: 05-081-00 Facility ID: 423345

Facility Name: Weber Number: 32-4
Qtrqr: SW Sec: 4 Twp: 6N Range: 92W Meridian: 6
NE
Latitude: 40.501175 Longitude: -107.722908

CORRECTIVE ACTIONS:

1 CA# 153883

Corrective Action: Comply with Rule 1004.e Date: 08/02/2021

Response: CA COMPLETED Date of Completion: 07/26/2021

Operator Comment: cut and sprayed weeds

COGCC Decision: _____

COGCC
Representative:

2 CA# 153884

Corrective Action: Comply with Rule 1002.f.(2).C; ensure control measures are adequate for the sites conditions and are installed in accordance with good engineering practices to minimize erosion from unpaved areas, including road surfaces and and cut/fill slopes, and allow for sediment laden-free stormwater discharge. Ensure control measures are maintained in proper functioning condition. Ongoing stormwater monitoring/management required until site receives a passing final inspection

Date: 08/02/2021

Response: CA COMPLETED

Date of Completion: 07/26/2021

Operator Comment: fixed BMP's on road for stormwater discharge

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: Karen Maneotis

Signed: _____

Title: Production Tech

Date: 7/26/2021 11:09:26 AM

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