

COGCC Complaint Intake Tool

By Submitting this form you are requesting an investigation of compliance with COGCC rules.

Note: Please provide as much detail related to location and issue as possible. Without enough detail, the COGCC will not be able to process or investigate the complaint and, therefore, the COGCC will have no choice but to discard the complaint.

File a written complaint via e-mail instead. -- [Email OGCC Complaint](#)

COMPLAINT INFORMATION

Date of Complaint

08/17/2021

***** *Indicates a Required Field*

Complaint Type *

Select all that apply

- | | |
|--|---|
| <input checked="" type="checkbox"/> Air Quality/ Odor | <input type="checkbox"/> Dust |
| <input type="checkbox"/> Ground Water/ Water Well | <input type="checkbox"/> Lighting |
| <input checked="" type="checkbox"/> Noise | <input type="checkbox"/> Property Damage |
| <input type="checkbox"/> Royalties Payment/ Missing Production | <input type="checkbox"/> Spills/ Soil Contamination |
| <input type="checkbox"/> Traffic | <input type="checkbox"/> Waste Management/ Dumping |
| <input type="checkbox"/> Notice Letters | <input type="checkbox"/> Other <input type="text"/> |

Incident County *

Adams County

Connection to Incident *

Select all that apply

- | | |
|---|--|
| <input type="checkbox"/> Land Owner | <input type="checkbox"/> Royalty Owner |
| <input checked="" type="checkbox"/> Nearby Resident | <input type="checkbox"/> Observed Incident |
| <input type="checkbox"/> Other <input type="text"/> | |

Will you provide your personal information for this complaint? *

☒ Yes ☐ No

Contact Information

Your First Name *

Robert

Your Last Name *

Andersen

Your Address *

15153 Vine Way

Your City *

Thornton

Your State

CO

Your Zip Code *

Maximum of 10 digits. (Example) 80202

80602

Email Address *

Enter a valid email address in this field to receive a confirmation e-mail and copy of your Complaint form.

mightytalldude@gmail.com

Your Phone Number

Used only to follow up. Please enter phone number in this format: (Example) 123-456-7890

303-217-6554

Alternate Phone Number

Used only to follow up. Please enter phone number in this format: (Example) 123-456-7890

What is your preferred method for the COGCC to communicate with you throughout the investigation? *

Select all that apply

☐ Phone ☒ E-mail ☐ US Mail

DESCRIPTION OF COMPLAINT

(Please be as specific as possible)

Location of Concern *

Please provide as much detail as possible. It is important to narrow down the location.

Ivey Well site, 152nd Parkway

Detailed description of the issue(s) * (?)

Please provide as much detail as possible. It is important to narrow down the issue(s).

Loud roaring fan noise from 10pm through 6am 8/16-8/17/21 with plumes of diesel exhaust smell and visual output. Poor Denver air quality isn't from automobiles, it's driven by this crap. The brown cloud starts at this site. The noise is so loud 1300 feet away, it has to be exceeding safe working levels for employees on site.

Is this an ongoing issue(s)? *

☒ Yes ☐ No

Do you know who the oil and gas company is? *

☒ Yes ☐ No

Oil and Gas Company Name

Great Western

Did you contact the oil and gas company? *

☐ Yes ☒ No

Well or Facility Name

Please provide if known

Ivey

Well or Facility Number

Please provide if known

ADDITIONAL INFORMATION**Are there supporting documents you wish to upload? ***

☐ Yes ☒ No