

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:

402822775

Date Received:

09/27/2021

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

Allred, Josh

970-629-5914

jallred@foundationenergy.com

Contact, General

regulatory@foundationenergy.com

Ellsworth, Stuart

Stuart.ellsworth@state.co.us

COGCC INSPECTION SUMMARY:

FIR Document Number: 675103185

Inspection Date: 12/13/2016

FIR Submit Date: 12/15/2016

FIR Status: _____

Inspected Operator Information:

Company Name: FOUNDATION ENERGY MANAGEMENT LLC

Company Number: 10112

Address: 16000 DALLAS PARKWAY #875

City: DALLAS State: TX Zip: 75248-6607

LOCATION - Location ID: 335755

Location Name: COLUMBINE SP FED-64S104W Number: 14SENW County: _____

Qtrqtr: SENW Sec: 14 Twp: 4S Range: 104W Meridian: 6

Latitude: 39.713000 Longitude: -109.040767

FACILITY - API Number: 05-103- -00 Facility ID: 335755

Facility Name: COLUMBINE SP FED-64S104W Number: 14SENW

Qtrqtr: SENW Sec: 14 Twp: 4S Range: 104W Meridian: 6

Latitude: 39.713000 Longitude: -109.040767

CORRECTIVE ACTIONS:

1 ☒ CA# 54618

Corrective Action: Contact Area COGCC Engineer if beyond required time frame or Fails MIT

Date: 12/25/2016

Response: CA COMPLETED

Date of Completion: 06/19/2019

Well was plugged and abandoned in June 2019 (Form 6 SROA Doc #402093632).

Operator _____
Comment: _____

COGCC Decision: Approved pending re-inspection

COGCC
Representative: _____

OPERATOR COMMENT AND SUBMITTAL

Comment: Corrective action 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: 9/27/2021 7:36:35 AM

ATTACHMENT LIST

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

Document Number **Description**

402822775	FIR RESOLUTION SUBMITTED
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Total Attach: 1 Files