

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:
402910676

Date Received:
12/28/2021

FIR RESOLUTION FORM

Overall Status:

CA Summary:

3 of 3 CAs from the FIR responded to on this Form

3 CA Completed
0 Factual Review Request

OPERATOR INFORMATION

OGCC Operator Number: 8960
Name of Operator: BONANZA CREEK ENERGY OPERATING COMPANY LLC
Address: 410 17TH STREET SUITE #1400
City: DENVER State: CO Zip: 80202

Contact Name and Telephone:
Name: _____
Phone: () _____ Fax: () _____
Email: _____

Additional Operator Contact:

Contact Name	Phone	Email
<u>Mike Storey</u>	<u>970-939-6353</u>	<u>Mstorey@CiviResources.com</u>

COGCC INSPECTION SUMMARY:

FIR Document Number: 696303840
Inspection Date: 12/13/2021 FIR Submit Date: 12/13/2021 FIR Status: _____

Inspected Operator Information:

Company Name: BONANZA CREEK ENERGY OPERATING COMPANY LLC Company Number: 8960
Address: 410 17TH STREET SUITE #1400
City: DENVER State: CO Zip: 80202

LOCATION - Location ID: 421167

Location Name: Antelope Number: 42-31 County: _____
Qtrqr: SENE Sec: 31 Twp: 5N Range: 62W Meridian: 6
Latitude: 40.357970 Longitude: -104.359360

FACILITY - API Number: 05-123-00 Facility ID: 421167

Facility Name: Antelope Number: 42-31
Qtrqr: SENE Sec: 31 Twp: 5N Range: 62W Meridian: 6
Latitude: 40.357970 Longitude: -104.359360

CORRECTIVE ACTIONS:

1 CA# 158635

Corrective Action: Install sign to comply with Rule 605.d. Date: 01/14/2022

Response: CA COMPLETED Date of Completion: 12/28/2021

Operator Comment: Signs have been installed in compliance with Rule 605.h.

COGCC Decision: _____

COGCC
Representative:

2 CA# 158636

Corrective Action:

Date: 01/14/2022

Response: CA COMPLETED

Date of Completion: 12/28/2021

Operator
Comment:

COGCC Decision: _____

COGCC
Representative:

3 CA# 158637

Corrective Action:

Date: 12/17/2021

Response: CA COMPLETED

Date of Completion: 12/28/2021

Operator
Comment:

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: Aubrey Noonan

Signed: _____

Title: Regulatory Analyst

Date: 12/28/2021 1:38:02 PM

ATTACHMENT LIST

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

Document Number **Description**

402910681	Inspection photos
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Total Attach: 1 Files