

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:
403046378

Date Received:
05/11/2022

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: 10027

Name of Operator: C & J FIELD SERVICES

Address: 3650 COUNTY RD #2

City: RANGELY State: CO Zip: 81648

Contact Name and Telephone:

Name: _____

Phone: () _____ Fax: () _____

Email: _____

Additional Operator Contact:

Contact Name

Phone

Email

Linda Gordon

9706291116

lcgordon1@yahoo.com

COGCC INSPECTION SUMMARY:

FIR Document Number: 675100949

Inspection Date: 01/31/2015

FIR Submit Date: 01/31/2015

FIR Status: ACTION REQUIRED

Inspected Operator Information:

Company Name: C & J FIELD SERVICES

Company Number: 10027

Address: 3650 COUNTY RD #2

City: RANGELY State: CO Zip: 81648

LOCATION - Location ID: 315961

Location Name: ADAM-62N103W Number: 5SWNW County: RIO BLANCO

Qtrqr: SWN Sec: 5 Twp: 2N Range: 103W Meridian: 6
W

Latitude: 40.173244 Longitude: -108.987340

FACILITY - API Number: 05-103-00 Facility ID: 231808

Facility Name: ADAM Number: 2

Qtrqr: SWN Sec: 5 Twp: 2N Range: 103W Meridian: 6
W

Latitude: 40.173410 Longitude: -108.987430

CORRECTIVE ACTIONS:

1 CA# 18994

Corrective Action: Install sign to comply with rule 210.

Date: 03/06/2015

Response: CA COMPLETED

Date of Completion: 05/11/2022

Operator Comment: done

COGCC Decision: _____

COGCC
Representative:

2 CA# 32314

Corrective Action: Implement and maintain stormwater BMP's

Date: 03/06/2015

Response: CA COMPLETED

Date of Completion: 05/11/2022

Operator
Comment: done

COGCC Decision: _____

COGCC
Representative:

3 CA# 41466

Corrective Action: Remove weeds/brush from tank battery berms

Date: 03/06/2015

Response: CA COMPLETED

Date of Completion: 05/11/2022

Operator
Comment: done

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: Linda Gordon

Signed: _____

Title: office

Date: 5/11/2022 4:49:13 PM

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