

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:

402832662

Date Received:

10/06/2021

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
<u>Contact, General</u>		<u>regulatory@foundationenergy.com</u>
<u>Ellsworth, Stuart</u>		<u>Stuart.ellsworth@state.co.us</u>
<u>Allred, Josh</u>	<u>970-629-5914</u>	<u>jallred@foundationenergy.com</u>

COGCC INSPECTION SUMMARY:

FIR Document Number: 675103187

Inspection Date: 12/15/2016

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: 315477

Location Name: COLUMBINE SP FED-64S104W Number: 14SESW County: RIO BLANCO

Qtrqr: SESW Sec: 14 Twp: 4S Range: 104W Meridian: 6

Latitude: 39.706800 Longitude: -109.042690

FACILITY - API Number: 05-103-00 Facility ID: 230897

Facility Name: COLUMBINE SP FED Number: 3-14-4-104

Qtrqr: SESW Sec: 14 Twp: 4S Range: 104W Meridian: 6

Latitude: 39.706800 Longitude: -109.042690

CORRECTIVE ACTIONS:

1 ☒ CA# 54617

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

Date: 12/25/2016

Response: CA COMPLETED

Date of Completion: 06/16/2019

Operator Comment: Well was plugged and abandoned in June 2019; Form 6 SROA was submitted 7/19/2019 (Doc #402093714).

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: 10/6/2021 7:56:50 AM

ATTACHMENT LIST

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

Document Number **Description**

402832662	FIR RESOLUTION SUBMITTED
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Total Attach: 1 Files