

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:
403093410

Date Received:
06/30/2022

FIR RESOLUTION FORM

Overall Status:

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: 10133

Name of Operator: HILCORP ENERGY COMPANY

Address: P O BOX 61229

City: HOUSTON State: TX Zip: 77208

Contact Name and Telephone:

Name: _____

Phone: () _____ Fax: () _____

Email: _____

Additional Operator Contact:

Contact Name	Phone	Email
Shorty, Priscilla		pshorty@hilcorp.com
Jones, Tammy		tajones@hilcorp.com

COGCC INSPECTION SUMMARY:

FIR Document Number: 693904549

Inspection Date: 05/24/2022

FIR Submit Date: 05/26/2022

FIR Status: _____

Inspected Operator Information:

Company Name: HILCORP ENERGY COMPANY

Company Number: 10133

Address: P O BOX 61229

City: HOUSTON State: TX Zip: 77208

LOCATION - Location ID: 326488

Location Name: ALLISON UNIT-N32N6W Number: 19SWNE County: LA PLATA

Qtrqtr: SWNE Sec: 19 Twp: 32N Range: 6W Meridian: N

Latitude: 37.003170 Longitude: -107.540450

FACILITY - API Number: 05-067-00 Facility ID: 89082

Facility Name: ALLISON UNIT Number: 25M

Qtrqtr: SWNE Sec: 19 Twp: 32N Range: 6W Meridian: N

Latitude: 37.003170 Longitude: -107.540450

CORRECTIVE ACTIONS:

1 CA# 162290

Corrective Action:

-Stabilization measures need to be conducted on the well pad to prevent deep tracking and stabilize driving surface. Additionally, operator needs to close reclamation areas to vehicle traffic and educate personnel to avoid driving on reclamation areas in order to prevent site degradation. Corrective action date 6/30/2022.

Date: 06/30/2022

Response: CA COMPLETED

Date of Completion: 06/29/2022

Tamarisk tree has been removed.
Signs and fencing installed to keep vehicles off reclaimed area.

Operator Comment: Location ruts have been filled in and repaired.

COGCC Decision: _____

COGCC Representative: _____

OPERATOR COMMENT AND SUBMITTAL

Comment: All corrective actions are resolved - see attached photos.

I hereby certify that the statements made in this form are, to the best of my knowledge, true, correct, and complete.

Print Name: Tammy Jones

Signed: _____

Title: Ops/Regulatory Tech

Date: 6/30/2022 7:58:25 AM

ATTACHMENT LIST

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

Document Number Description

403093412	Resolved Photos
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Total Attach: 1 Files