

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:  
403115532

Date Received:  
07/26/2022

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: 16700

Name of Operator: CHEVRON USA INC

Address: 760 HORIZON DRIVE STE 401

City: GRAND JUNCTION State: CO Zip: 81506

Contact Name and Telephone:

Name: \_\_\_\_\_

Phone: ( ) \_\_\_\_\_ Fax: ( ) \_\_\_\_\_

Email: \_\_\_\_\_

Additional Operator Contact:

Contact Name	Phone	Email
<u>Chester O'Nan</u>		<u>CNOC@chevron.com</u>
<u>Andrew Olson</u>		<u>AndrewOlson@chevron.com</u>
<u>Rachel Puechner</u>		<u>RPuechner@chevron.com</u>
<u>Dawn Bittner</u>		<u>stephaniebittner@chevron.com</u>

COGCC INSPECTION SUMMARY:

FIR Document Number: 702800280

Inspection Date: 05/25/2022

FIR Submit Date: 06/03/2022

FIR Status: \_\_\_\_\_

Inspected Operator Information:

Company Name: CHEVRON USA INC

Company Number: 16700

Address: 760 HORIZON DRIVE STE 401

City: GRAND JUNCTION State: CO Zip: 81506

LOCATION - Location ID: 398843

Location Name: WILSON CREEK UNIT-63N94W Number: 35SESW County: \_\_\_\_\_

Qtrqtr: SESW Sec: 35 Twp: 3N Range: 94W Meridian: 6

Latitude: 40.180320 Longitude: -107.908917

FACILITY - API Number: 05-103-00

Facility ID: 398843

Facility Name: WILSON CREEK UNIT-63N94W Number: 35SESW

Qtrqtr: SESW Sec: 35 Twp: 3N Range: 94W Meridian: 6

Latitude: 40.180320 Longitude: -107.908917

CORRECTIVE ACTIONS:

1 CA# 162431

Corrective Action: Conduct weed management to prevent further establishment and spread of List B Noxious Weeds; ongoing weed management required until location passes final reclamation.

Date: 06/17/2022

Response: CA COMPLETED

Date of Completion: 06/13/2022

Operator  
Comment:

Weed spraying was completed on 06/13/2022 with the desired noxious weed removal. Picture is attached.

COGCC Decision: \_\_\_\_\_

COGCC  
Representative:

\_\_\_\_\_

OPERATOR COMMENT AND SUBMITTAL

Comment: Corrective action has been completed and picture is attached.

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

Print Name: Dawn Bittner

Signed: \_\_\_\_\_

Title: Administrative Assistant

Date: 7/26/2022 9:02:13 AM

**ATTACHMENT LIST**

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

**Document Number**      **Description**

403116257	Location photos
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Total Attach: 1 Files