

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:
403124816

Date Received:
08/03/2022

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: 10633

Name of Operator: CRESTONE PEAK RESOURCES OPERATING LLC

Address: 1801 CALIFORNIA STREET #2500

City: DENVER State: CO Zip: 80202

Contact Name and Telephone:

Name: _____

Phone: () _____ Fax: () _____

Email: _____

Additional Operator Contact:

Contact Name

Phone

Email

Mike Storey

970-939-6353

mstorey@civiresources.com

COGCC INSPECTION SUMMARY:

FIR Document Number: 689501346

Inspection Date: 03/29/2022

FIR Submit Date: 03/30/2022

FIR Status: _____

Inspected Operator Information:

Company Name: CRESTONE PEAK RESOURCES OPERATING LLC

Company Number: 10633

Address: 1801 CALIFORNIA STREET #2500

City: DENVER State: CO Zip: 80202

LOCATION - Location ID: 332754

Location Name: ARISTOCRAT ANGUS
63N65W 4SESW

Number: MULTI
WELL PAD

County: _____

Qtrqtr: SESW Sec: 4 Twp: 3N Range: 65W Meridian: 6

Latitude: 40.249210 Longitude: -104.669958

FACILITY - API Number: 05-123-

-00

Facility ID: 481318

Facility Name: Aristocrat Angus 63N65W
4SESW

Number: _____

Qtrqtr: SESW Sec: 4 Twp: 3N Range: 65W Meridian: 6

Latitude: 40.249210 Longitude: -104.669958

CORRECTIVE ACTIONS:

1 ☒ CA# 160520

Corrective Action: In accordance with Rule 912.a.(6) no later than 90 days after a Spill or Release is discovered Operator will submit a Form 19 Supplemental requesting closure. Closure of this spill can be requested with work proceeding under Remediation Project No 21587.

Date: 03/20/2022

Response: CA COMPLETED

Date of Completion: 08/03/2022

Form 19, closed out via Document #402904666. Form 27 Remediation Project was opened up under Remediation Project #21587 (Document # 402952392)

Operator
Comment:

COGCC Decision: Approved

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: 8/3/2022 8:13:09 AM

ATTACHMENT LIST

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

Document Number **Description**

403124816	FIR RESOLUTION SUBMITTED
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Total Attach: 1 Files