

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:  
402887412

Date Received:  
12/06/2021

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>Alyssa Beard</u> | <u>3032448114</u> | <u>abeard@foundationenergy.com</u> |

COGCC INSPECTION SUMMARY:

FIR Document Number: 701003881  
Inspection Date: 11/04/2021 FIR Submit Date: 11/05/2021 FIR Status: \_\_\_\_\_

Inspected Operator Information:

Company Name: FOUNDATION ENERGY MANAGEMENT LLC Company Number: 10112  
Address: 5057 KELLER SPRINGS RD STE 650  
City: ADDISON State: TX Zip: 75001

LOCATION - Location ID: 303232

Location Name: STATE-64S42W Number: 16SESE County: YUMA  
Qtrqr: SESE Sec: 16 Twp: 4S Range: 42W Meridian: 6  
Latitude: 39.706140 Longitude: -102.066220

FACILITY - API Number: 05-125-00 Facility ID: 252718

Facility Name: STATE Number: 16-16  
Qtrqr: SESE Sec: 16 Twp: 4S Range: 42W Meridian: 6  
Latitude: 39.706140 Longitude: -102.066220

CORRECTIVE ACTIONS:

1  CA# 157713

Corrective Action: Install sign to comply with Rule 605.d. Date: 12/04/2021

Response: CA COMPLETED Date of Completion: 12/03/2021

Operator Comment: A new sign was made for the State 16-16 well and was placed in the field. Please see attached photo of new sign.

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: Alyssa Beard

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

Title: EHSR Manager

Date: 12/6/2021 7:51:31 AM

**ATTACHMENT LIST**

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

| <b><u>Document Number</u></b> | <b><u>Description</u></b>      |
|-------------------------------|--------------------------------|
| 402887412                     | FIR RESOLUTION SUBMITTED       |
| 402887416                     | New sign - Photo Documentation |

Total Attach: 2 Files