

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:

403241177

Date Received:

11/28/2022

FIR RESOLUTION FORM

Overall Status: CAC

CA Summary:

1 of 2 CAs from the FIR responded to on this Form

1 CA Completed
0 Factual Review Request

OPERATOR INFORMATION

OGCC Operator Number: 46685

Name of Operator: KINDER MORGAN CO2 CO LP

Address: 1001 LOUISIANA ST SUITE 1000

City: HOUSTON State: TX Zip: 77002

Contact Name and Telephone:

Name: _____

Phone: () _____ Fax: () _____

Email: _____

Additional Operator Contact:

Contact Name

Phone

Email

General

CO2Source_Regulatory@kindermorgan.com

COGCC INSPECTION SUMMARY:

FIR Document Number: 700300496

Inspection Date: 11/02/2022

FIR Submit Date: 11/09/2022

FIR Status: _____

Inspected Operator Information:

Company Name: KINDER MORGAN CO2 CO LP

Company Number: 46685

Address: 1001 LOUISIANA ST SUITE 1000

City: HOUSTON State: TX Zip: 77002

LOCATION - Location ID: 313504

Location Name: MCELMO DOME UNIT 20-37-18-N37N18W Number: 20SENW County: MONTEZUMA

Qtrqtr: SENW Sec: 20 Twp: 37N Range: 18W Meridian: N

Latitude: 37.450085 Longitude: -108.859815

FACILITY - API Number: 05-083-00 Facility ID: 224309

Facility Name: MCELMO DOME UNIT 20-37-18 Number: YC-2

Qtrqtr: SENW Sec: 20 Twp: 37N Range: 18W Meridian: N

Latitude: 37.450085 Longitude: -108.859815

CORRECTIVE ACTIONS:

1 ☒ CA# 166008

Corrective Action: Install appropriate local emergency response services number to comply with rule 605

Date: 12/09/2022

Response: CA COMPLETED

Date of Completion: 11/10/2022

Operator Comment: Local emergency response service number has been added to the YC-2 well sign. See attached photo.

COGCC Decision: Approved

| | |
|-----------------------|------------------------|
| COGCC Representative: | approved |
| COGCC Supervisor: | approved, sign CA only |

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|---|-----------------------------|
| <u>OPERATOR COMMENT AND SUBMITTAL</u> | |
| Comment: | |
| I hereby certify that the statements made in this form are, to the best of my knowledge, true, correct, and complete. | |
| Print Name: Jenna Emerick | Signed: _____ |
| Title: EHS Specialist | Date: 11/28/2022 2:37:51 PM |

ATTACHMENT LIST

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

| <u>Document Number</u> | <u>Description</u> |
|-------------------------------|---------------------------|
| 403241177 | FIR RESOLUTION SUBMITTED |
| 403241203 | Well Sign Photo |

Total Attach: 2 Files