

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:

403313411

Date Received:

02/06/2023

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: 10793

Name of Operator: POLARIS PRODUCTION OPCO LLC

Address: 100 GLENBOROUGH DR SUITE 442

City: HOUSTON State: TX Zip: 77067

Contact Name and Telephone:

Name: _____

Phone: () _____ Fax: () _____

Email: _____

Additional Operator Contact:

Contact Name	Phone	Email
<u>Wachel, Greg</u>	<u>346-444-3321</u>	<u>gwachel@fortify.energy</u>
<u>Spear, Sam</u>	<u>970-554-1988</u>	<u>sspear@polaris.energy</u>

COGCC INSPECTION SUMMARY:

FIR Document Number: 706700137

Inspection Date: 12/12/2022 FIR Submit Date: 12/16/2022 FIR Status: _____

Inspected Operator Information:

Company Name: D90 ENERGY LLC Company Number: 10706

Address: 952 ECHO LANE SUITE 480

City: HOUSTON State: TX Zip: 77024

LOCATION - Location ID: 440099

Location Name: KEYSTONE Number: 3-7 County: LINCOLN

Qtrqtr: NWNE Sec: 7 Twp: 7S Range: 54W Meridian: 6

Latitude: 39.460030 Longitude: -103.482520

FACILITY - API Number: 05-073- -00 Facility ID: 440097

Facility Name: KEYSTONE Number: 3-7

Qtrqtr: NWNE Sec: 7 Twp: 7S Range: 54W Meridian: 6

Latitude: 39.460030 Longitude: -103.482520

CORRECTIVE ACTIONS:

1 ☒ CA# 166604

Corrective Action: Calibrate gas metering equipment annually to comply with rule 430.d.(1).

Date: 02/01/2023

Response: CA COMPLETED

Date of Completion: 02/03/2023

Operator Comment: Empact Analytical came out on 2/3/23 and recalibrated the meter. It was witnessed by Field Inspector Susan Sherman. A gas sample was taken and we are waiting on results.

COGCC Decision: Approved pending re-inspection

COGCC Representative: Inspector did not witness the Empact meter recalibration.

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: Greg Wachel

Signed: _____

Title: Chief Operating Officer

Date: 2/6/2023 3:00:11 PM

ATTACHMENT LIST

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

Document Number **Description**

403313411	FIR RESOLUTION SUBMITTED
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Total Attach: 1 Files