

State of Colorado
Energy & Carbon Management Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203
Phone: (303) 894-2100 Fax: (303) 894-2109



Document Number:

403426886

Date Received:

06/08/2023

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: 47120

Name of Operator: KERR MCGEE OIL & GAS ONSHORE LP

Address: 501 N DIVISION BLVD

City: PLATTEVILLE State: CO Zip: 80651

Contact Name and Telephone:

Name: _____

Phone: () _____ Fax: () _____

Email: _____

Additional Operator Contact:

Contact Name

Phone

Email

COGCCInspections@Oxy.com

Austin_Lee@oxy.com

COGCC INSPECTION SUMMARY:

FIR Document Number: 709400136

Inspection Date: 04/05/2023

FIR Submit Date: 04/21/2023

FIR Status: _____

Inspected Operator Information:

Company Name: KERR MCGEE OIL & GAS ONSHORE LP

Company Number: 47120

Address: P O BOX 173779

City: DENVER

State: CO

Zip: 80217-3779

LOCATION - Location ID: 434838

Location Name: WAGNER

Number: 34N-34HZ

County: _____

Qtrqr: NWN
W

Sec: 34

Twp: 1N

Range: 67W

Meridian: 6

Latitude: 40.012494

Longitude: -104.884152

FACILITY - API Number: 05-123-

-00

Facility ID: 434838

Facility Name: WAGNER

Number: 34N-34HZ

Qtrqr: NWN
W

Sec: 34

Twp: 1N

Range: 67W

Meridian: 6

Latitude: 40.012494

Longitude: -104.884152

CORRECTIVE ACTIONS:

1 ☒ CA# 169944

Corrective Action: To comply with Rule 1002.f., Operator shall reclaim, reseed and stabilize the flowline scare.

Date: _____

Response: CA COMPLETED

Date of Completion: 06/01/2023

Operator
Comment:

See work completion report.

COGCC Decision: Approved pending re-inspection

COGCC Representative: The approval of this FIRR is an acknowledgement that the document was received. It is not a final approval as the outcome of the methods will be determined on the ground during an inspection at a future date.

COGCC Supervisor: The approval of this FIRR is an acknowledgement that the document was received. It is not a final approval as the outcome of the methods will be determined on the ground during an inspection at a future date.

OPERATOR COMMENT AND SUBMITTAL

Comment: ATTN: Reed Wold

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

Print Name: Austin Lee

Signed: _____

Title: HSE Advisor

Date: 6/8/2023 7:56:08 AM

ATTACHMENT LIST

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

Document Number Description

403426886	FIR RESOLUTION SUBMITTED
403426889	Work Completion Report

Total Attach: 2 Files