

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:
403554420

Date Received:
10/09/2023

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: P O BOX 173779
City: DENVER State: CO Zip: 80217-3779

Contact Name and Telephone:
Name: _____
Phone: () _____ Fax: () _____
Email: _____

Additional Operator Contact:

Contact Name	Phone	Email
<u>ERIN JOSEPH</u>	<u>970-515-1169</u>	<u>COGCCInspections@Oxy.com</u>

COGCC INSPECTION SUMMARY:

FIR Document Number: 697504877
Inspection Date: 09/28/2023 FIR Submit Date: 10/04/2023 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: 482983

Location Name: SWARTZ Number: 2-4HZ County: _____
Qtrqr: NWNE Sec: 4 Twp: 3N Range: 67W Meridian: 6
Latitude: 40.260465 Longitude: -104.891432

FACILITY - API Number: 05-123-00 Facility ID: 482983

Facility Name: SWARTZ Number: 2-4HZ
Qtrqr: NWNE Sec: 4 Twp: 3N Range: 67W Meridian: 6
Latitude: 40.260465 Longitude: -104.891432

CORRECTIVE ACTIONS:

1 CA# 182974

Corrective Action: Comply with Rule 406.e.(1) Date: 10/06/2023

Response: CA COMPLETED Date of Completion: 10/06/2023

Operator Comment: currently drilling on well 8 of 11. Once surface strings are run, casing head and night caps will be installed

COGCC Decision: Approved pending re-inspection

Approved pending re-inspection of this FIR resolution acknowledges the document was received. It is not an

COGCC Representative: acknowledgement that the corrective action has been passed. A field inspection will be conducted at a future date to evaluate compliance with COGCC standards.

OPERATOR COMMENT AND SUBMITTAL

Comment:

[Empty comment box]

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

Print Name: ERIN JOSEPH

Signed: _____

Title: SR REGULATORY ADVISOR

Date: 10/9/2023 2:14:25 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>
403554420	FIR RESOLUTION SUBMITTED

Total Attach: 1 Files