

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:
403570478

Date Received:
10/24/2023

FIR RESOLUTION FORM

Overall Status:

CA Summary:

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

2 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

COGCC INSPECTION SUMMARY:

FIR Document Number: 697504814

Inspection Date: 08/23/2023

FIR Submit Date: 09/12/2023

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: 470396

Location Name: DAMORE

Number: 5-18HZ PAD

County: _____

Qtrqtr: SWN
W

Sec: 18

Twp: 5N

Range: 67W

Meridian: 6

Latitude: 40.401012

Longitude: -104.942349

FACILITY - API Number: 05-123-

-00

Facility ID: 470396

Facility Name: DAMORE

Number: 5-18HZ PAD

Qtrqtr: SWN
W

Sec: 18

Twp: 5N

Range: 67W

Meridian: 6

Latitude: 40.401012

Longitude: -104.942349

CORRECTIVE ACTIONS:

1 CA# 180901

Corrective Action: Comply with Rule 606. The corrective action date is the date the location was observed out of compliance.

Date: 08/23/2023

Response: CA COMPLETED

Date of Completion: 10/06/2023

Operator Comment: See attached Work Completion report

COGCC Decision: _____

COGCC
Representative:

2 CA# 180902

Corrective Action: Comply with Rule 1002.c. Best management practices to prevent weed establishment shall be implemented. Control, manage, and prevent weedy, annual vegetation on all topsoil stockpiles.

Date: 08/23/2023

The corrective date is the date the location was observed out of compliance.

Response: CA COMPLETED

Date of Completion: 10/06/2023

Operator
Comment: See attached Work Completion report

COGCC Decision: _____

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: Austin Lee

Signed: _____

Title: Advisor HSE Environ Ops

Date: 10/24/2023 10:04:31 AM

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>
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403570484	Work Completion report
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Total Attach: 1 Files