

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:
403567259

Date Received:
11/06/2023

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: 10684

Name of Operator: EPIC ENERGY LLC

Address: 332 RD 3100

City: AZTEC State: NM Zip: 87410

Contact Name and Telephone:

Name: _____

Phone: () Fax: ()

Email: _____

Additional Operator Contact:

Contact Name

Phone

Email

Smith, Arleen

arleen@walsheng.net

Labowskie, Steve

steve.labowskie@state.co.us

Martinez, Shawna

shawna@walsheng.net

COGCC INSPECTION SUMMARY:

FIR Document Number: 712700710

Inspection Date: 10/05/2023

FIR Submit Date: 10/06/2023

FIR Status: _____

Inspected Operator Information:

Company Name: EPIC ENERGY LLC

Company Number: 10684

Address: 332 RD 3100

City: AZTEC State: NM Zip: 87410

LOCATION - Location ID: 306967

Location Name: BONDAD 33-9-N33N9W Number: 13SENE County: LA PLATA

Qtrqtr: SENE Sec: 13 Twp: 33N Range: 9W Meridian: N

Latitude: 37.104910 Longitude: -107.769120

FACILITY - API Number: 05-067-00 Facility ID: 285782

Facility Name: BONDAD 33-9 Number: 33A

Qtrqtr: SENE Sec: 13 Twp: 33N Range: 9W Meridian: N

Latitude: 37.104910 Longitude: -107.769120

CORRECTIVE ACTIONS:

1 CA# 183288

Corrective Action: Mark or remove if not serviceable or no longer needed for ongoing operations.

Date: 10/20/2023

Response: CA COMPLETED

Date of Completion: 10/20/2023

Operator
Comment:

The anchor has been marked.

COGCC Decision: _____

COGCC
Representative:

2 CA# 183289

Corrective Action: Post local emergency services number or 911 on well location signage.

Date: 11/06/2023

Response: CA COMPLETED

Date of Completion: 11/02/2023

Operator
Comment:

Emergency Services Number Posted

COGCC Decision: _____

COGCC
Representative:

OPERATOR COMMENT AND SUBMITTAL

Comment: Anchor has been marked. Emergency Services Number has been posted

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

Print Name: Shawna Martinez

Signed: _____

Title: Regulatory

Date: 11/6/2023 10:40:37 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>
403567280	Anchor is marked
403585605	Emergency Services Number Posted

Total Attach: 2 Files