

State of Colorado
Energy & Carbon Management Commission



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Document Number:
403638479

Date Received:
12/28/2023

FIR RESOLUTION FORM

Overall Status:

CA Summary:
3 of 3 CAs from the FIR responded to on this Form
3 CA Completed
0 Factual Review Request

OPERATOR INFORMATION

OGCC Operator Number: 66561
Name of Operator: OXY USA INC
Address: PO BOX 173779
City: DENVER State: CO Zip: 80217-3779
Contact Name and Telephone:
Name:
Phone: () Fax: ()
Email:

Additional Operator Contact:

Contact Name	Phone	Email
Eric Maestas		eric_maestas@oxy.com
ERIN JOSEPH	970-515-1169	ECMCINSPECTIONS@OXY.COM

COGCC INSPECTION SUMMARY:

FIR Document Number: 690203052
Inspection Date: 06/16/2022 FIR Submit Date: 06/17/2022 FIR Status:

Inspected Operator Information:

Company Name: OXY USA INC Company Number: 66561
Address: PO BOX 173779
City: DENVER State: CO Zip: 80217-3779

LOCATION - Location ID: 324497

Location Name: SHEEP MOUNTAIN UNIT-628S70W Number: 1SESW County: HUERFANO
Qtrqr: SESW Sec: 1 Twp: 28S Range: 70W Meridian: 6
Latitude: 37.638270 Longitude: -105.172320

FACILITY - API Number: 05-055-00 Facility ID: 211802

Facility Name: SHEEP MOUNTAIN UNIT Number: 13-1
Qtrqr: SESW Sec: 1 Twp: 28S Range: 70W Meridian: 6
Latitude: 37.638270 Longitude: -105.172320

CORRECTIVE ACTIONS:

1 CA# 162776

Corrective Action: Repair or remove the cattle guard. Vehicles must stay on original access road boundary per Rule 1002.e. Date: 07/08/2022

Response: CA COMPLETED Date of Completion: 09/01/2022

Operator Comment: Access road around cattle guard shut in, Cattle guard repaired and back in service.

COGCC Decision: _____

COGCC Representative: _____

2 CA# 162777

Corrective Action: Comply with Rule 606.

Date: 07/08/2022

Response: CA COMPLETED

Date of Completion: 09/01/2022

Operator Comment: Gravel pile used on location. Old wattles removed from site.

COGCC Decision: _____

COGCC Representative: _____

3 CA# 162778

Corrective Action: Comply with Rule 1003.f.

Date: 07/01/2022

Response: CA COMPLETED

Date of Completion: 09/01/2022

Operator Comment: Noxious weeds have been mitigated per the weed management plan.

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: ERIN JOSEPH

Signed: _____

Title: SR REGULATORY ADVISOR

Date: 12/28/2023 10:32:22 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>

Total Attach: 0 Files