

# 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:  
403648099

Date Received:  
01/08/2024

## FIR RESOLUTION FORM

**Overall Status:**

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: 69175

Name of Operator: PDC ENERGY INC

Address: 1099 18TH STREET SUITE 1500

City: DENVER State: CO Zip: 80202

Contact Name and Telephone:

Name: \_\_\_\_\_

Phone: ( ) \_\_\_\_\_ Fax: ( ) \_\_\_\_\_

Email: \_\_\_\_\_

Additional Operator Contact:

Contact Name

Phone

Email

Tyranny Bergin

970-313-5547

EHSCOGCCInspections@pdce.com

### COGCC INSPECTION SUMMARY:

FIR Document Number: 701900995

Inspection Date: 07/15/2023

FIR Submit Date: 08/15/2023

FIR Status: \_\_\_\_\_

### Inspected Operator Information:

Company Name: PDC ENERGY INC

Company Number: 69175

Address: 1775 SHERMAN STREET - STE 3000

City: DENVER State: CO Zip: 80203

### LOCATION - Location ID: 327289

Location Name: LORENZ-64N66W Number: 28SESE County: \_\_\_\_\_

Qtrqr: SESE Sec: 28 Twp: 4N Range: 66W Meridian: 6

Latitude: 40.276906 Longitude: -104.774631

### FACILITY - API Number: 05-123-00 Facility ID: 327289

Facility Name: LORENZ-64N66W Number: 28SESE

Qtrqr: SESE Sec: 28 Twp: 4N Range: 66W Meridian: 6

Latitude: 40.276906 Longitude: -104.774631

### CORRECTIVE ACTIONS:

**1** CA# 178508

Corrective Action: Comply with Rule 1004. Collaborate with the landowner to allow reclamation work to be conducted in such a manner as to not interfere with agricultural activities or crop production.

Date: 07/15/2023

The corrective date is not intended to be the date for which the Operator shall complete the corrective actions but rather the corrective date is the date the location was observed out of compliance.

Response: CA COMPLETED

Date of Completion: 12/27/2023

Work has been completed and will continue to monitor. CA complete.

Operator \_\_\_\_\_  
Comment: \_\_\_\_\_

COGCC Decision: \_\_\_\_\_

COGCC Representative: \_\_\_\_\_

OPERATOR COMMENT AND SUBMITTAL

Comment: Work has been completed and will continue to monitor. CA complete.

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

Print Name: Tyranny Bergin Signed: \_\_\_\_\_

Title: H&S Specialist-Operations Date: 1/8/2024 2:59:04 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>

Total Attach: 0 Files