

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:
403897793

Date Received:
08/22/2024

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

ECMC Operator Number: 10459

Name of Operator: EXTRACTION OIL & GAS INC

Address: 555 17TH STREET SUITE 3700

City: DENVER State: CO Zip: 80202

Contact Name and Telephone:

Name: _____

Phone: () Fax: ()

Email: _____

Additional Operator Contact:

Contact Name

Phone

Email

Luke Kelly

970-939-6353

lkelly@civiresources.com

ECMC INSPECTION SUMMARY:

FIR Document Number: 717900014

Inspection Date: 08/02/2024

FIR Submit Date: 08/16/2024

FIR Status: _____

Inspected Operator Information:

Company Name: EXTRACTION OIL & GAS INC

Company Number: 10459

Address: 555 17TH STREET SUITE 3700

City: DENVER State: CO Zip: 80202

LOCATION - Location ID: 463216

Location Name: Schell 41, 42-6D Number: _____ County: _____

Qtrqtr: NENE Sec: 6 Twp: 3N Range: 67W Meridian: 6

Latitude: 40.262449 Longitude: -104.927922

FACILITY - API Number: 05-123-

-00

Facility ID: 463216

Facility Name: Schell 41, 42-6D

Number: _____

Qtrqtr: NENE Sec: 6 Twp: 3N Range: 67W Meridian: 6

Latitude: 40.262449 Longitude: -104.927922

CORRECTIVE ACTIONS:

1 CA# 197775

Corrective Action: Install or repair required BMPs per Rule 1002.f.(2)C

Date: 08/28/2024

Response: CA COMPLETED

Date of Completion: 08/22/2024

Operator
Comment:

Operator has reported that the tracking pad is no longer a current BMP; the working surface is stabilized with road base. All material will be removed during the final reclamation phase of the decommissioning. Operator also reports that the meter house belongs to DCP Midstream.

ECMC Decision: _____

ECMC
Representative:

OPERATOR COMMENT AND SUBMITTAL

Comment: CA follow-up has been completed for this location

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

Print Name: Ashley Noonan

Signed: _____

Title: Sr Regulatory Analyst

Date: 8/22/2024 11:10:08 AM

ATTACHMENT LIST

View Attachments in Imaged Documents on ECMC website (<http://ecmcweblink.state.co.us/>) - Search by Document Number.

Document Number **Description**

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Total Attach: 0 Files