

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:
404217294

Date Received:
05/27/2025

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

ECMC Operator Number: <u>47120</u>	Contact Name and Telephone:
Name of Operator: <u>KERR MCGEE OIL & GAS ONSHORE LP</u>	Name: _____
Address: <u>P O BOX 173779</u>	Phone: () _____ Fax: () _____
City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80217-3779</u>	Email: _____

Additional Operator Contact:

Contact Name	Phone	Email
<u>ERIN JOSEPH</u>	<u>970-515-1169</u>	<u>ECMCInspections@Oxy.com</u>

ECMC INSPECTION SUMMARY:
FIR Document Number: 717100203
Inspection Date: 05/14/2025 FIR Submit Date: 05/22/2025 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: _____
Location Name: _____ Number: _____ County: _____
Qtrqtr: NENE Sec: 25 Twp: 2N Range: 66W Meridian: 6
Latitude: 40.113123 Longitude: -104.718899

FACILITY - API Number: 05-123-00 Facility ID: 490165
Facility Name: Paragon Farms 42-25 Number: _____
Qtrqtr: NENE Sec: 25 Twp: 2N Range: 66W Meridian: 6
Latitude: 40.113123 Longitude: -104.718899

CORRECTIVE ACTIONS:

1 CA# 205037	
Corrective Action: <u>Secure access to excavation in accordance with Rule 913.b.(5).B.i and ECMC Guidance 913.b.(5)B i-v.</u>	Date: <u>06/05/2025</u>
Response: <u>CA COMPLETED</u>	Date of Completion: <u>05/23/2025</u>
Operator Comment: <u>SEE ATTACHED LOCATION PHOTOS</u>	
ECMC Decision: _____	

ECMC
Representative:

2 CA# 205038

Corrective Action: Operator shall comply with Rule 913.b.(5).B.iv. and properly store, handle, and manage all E&P Waste to prevent contamination of stormwater, surface water, Groundwater, and soil.

Date: _____

Response: CA COMPLETED

Date of Completion: 05/23/2025

Operator
Comment: SEE ATTACHED LOCATION PHOTOS

ECMC Decision: _____

ECMC
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: REGULATORY

Date: 5/27/2025 8:21:55 AM

ATTACHMENT LIST

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

Document Number **Description**

<u>Document Number</u>	<u>Description</u>

Total Attach: 0 Files