

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:
404248990

Date Received:
06/20/2025

FIR RESOLUTION FORM

Overall Status:

CA Summary:

1 of 6 CAs from the FIR responded to on this Form

1 CA Completed
0 Factual Review Request

OPERATOR INFORMATION

ECMC Operator Number: 10634
Name of Operator: P O & G OPERATING LLC
Address: 5847 SAN FELIPE SUITE 3200
City: HOUSTON State: TX Zip: 77057

Contact Name and Telephone:
Name: _____
Phone: () _____ Fax: () _____
Email: _____

Additional Operator Contact:

Contact Name	Phone	Email
<u>Sanchez, Chris</u>		<u>chris.sanchez@state.co.us</u>
<u>Waggoner, Kyle</u>		<u>kyle.waggoner@state.co.us</u>
<u>Nash, Charlotte</u>	<u>281.543.3606</u>	<u>charlotte_nash@pogresources.com</u>
<u>RANDO, CHRIS</u>		<u>christopher_rando@pogresources.com</u>
<u>Hudson, Glenn</u>	<u>713-589-8186</u>	<u>glenn_hudson@pogresources.com</u>

ECMC INSPECTION SUMMARY:

FIR Document Number: 717100253
Inspection Date: 05/30/2025 FIR Submit Date: 06/16/2025 FIR Status: _____

Inspected Operator Information:

Company Name: P O & G OPERATING LLC Company Number: 10634
Address: 5847 SAN FELIPE SUITE 3200
City: HOUSTON State: TX Zip: 77057

LOCATION - Location ID: 324937

Location Name: LOWE-611S46W Number: 14SWNE County: _____
Qtrqr: SWNE Sec: 14 Twp: 11S Range: 46W Meridian: 6
Latitude: 39.093720 Longitude: -102.528110

FACILITY - API Number: 05-063-00 Facility ID: 488679

Facility Name: Lowe 1B SWD Well Number: _____
Qtrqr: SWNE Sec: 14 Twp: 11S Range: 46W Meridian: 6
Latitude: 39.093720 Longitude: -102.528110

CORRECTIVE ACTIONS:

2 CA# 205654

Corrective Action: Comply with Rule 606. Date: 06/23/2025

Response: CA COMPLETED Date of Completion: 06/19/2025

Operator Comment: All vegetation has been removed from the excavated areas. Please see attached 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: Jessica Donahue

Signed: _____

Title: Compliance Specialist

Date: 6/20/2025 10:02:40 AM

ATTACHMENT LIST

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

<u>Document Number</u>	<u>Description</u>
404248990	FIR RESOLUTION SUBMITTED
404249085	Photos

Total Attach: 2 Files