

State of Colorado
Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203
Phone: (303) 894-2100 Fax: (303) 894-2109



Document Number:

402698184

Date Received:

05/24/2021

FIR RESOLUTION FORM

Overall Status: CAC

CA Summary:

2 of 2 CAs from the FIR responded to on this Form

2 CA Completed
0 Factual Review Request

OPERATOR INFORMATION

OGCC Operator Number: 10753

Name of Operator: MORNINGSTAR PARTNERS LP

Address: 400 W 7TH ST

City: FORT WORTH State: TX Zip: 76102

Contact Name and Telephone:

Name: _____

Phone: () _____ Fax: () _____

Email: _____

Additional Operator Contact:

Contact Name

Phone

Email

Elgin, Jerry

jelgin@mspartners.com

Gallenbeck, Danny

dgallenbeck@ctfieldsvc.com

Blaylock, Connie

cblaylock@mspartners.com

COGCC INSPECTION SUMMARY:

FIR Document Number: 689805659

Inspection Date: 04/09/2021

FIR Submit Date: 05/03/2021

FIR Status: _____

Inspected Operator Information:

Company Name: SOUTHLAND ROYALTY COMPANY LLC

Company Number: 10559

Address: 400 WEST 7TH STREET

City: FORT WORTH State: TX Zip: 76102

LOCATION - Location ID: 313078

Location Name: LATIN-69N91W Number: 12NWSE County: MOFFAT

Qtrqr: NWSE Sec: 12 Twp: 9N Range: 91W Meridian: 6

Latitude: 40.750606 Longitude: -107.549431

FACILITY - API Number: 05-081-

-00

Facility ID: 223531

Facility Name: LATIN Number: 33-12

Qtrqr: NWSE Sec: 12 Twp: 9N Range: 91W Meridian: 6

Latitude: 40.750606 Longitude: -107.549431

CORRECTIVE ACTIONS:

1 CA# 150441

Corrective Action: Calibrate gas metering equipment annually to comply with rule 430.d.(1).

Date: 06/03/2021

Response: CA COMPLETED

Date of Completion: 05/21/2021

Operator Comment: The meter has been calibrated as of 5/21/21.

COGCC Decision: _____

COGCC
Representative:

2 CA# 150442

Corrective Action: Comply with Rule 606.

Date: 05/10/2021

Response: CA COMPLETED

Date of Completion: 05/07/2021

Operator
Comment:

The tarp debris was cleared on 5/7/21 and photos were emailed to Emily Waldron before the CA due date of 5/10.

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: Connie Blaylock

Signed:

Title: Regulatory Analyst

Date: 5/24/2021 8:33:02 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>
402698225	Photo
402698226	Photo
402698228	Photo-Meter

Total Attach: 3 Files