

State of Colorado
Oil and Gas Conservation Commission

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Document Number:
402731271

Date Received:
06/28/2021

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

OGCC Operator Number: 10112
Name of Operator: FOUNDATION ENERGY MANAGEMENT LLC
Address: 5057 KELLER SPRINGS RD STE 650
City: ADDISON State: TX Zip: 75001

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

Additional Operator Contact:

Contact Name	Phone	Email
Thompson, Bud		BLThomps@BLM.gov
Energy, Foundation		regulatory@foundationenergy.com
Kellerby, Shaun	970-712-1248	shaun.kellerby@state.co.us

COGCC INSPECTION SUMMARY:

FIR Document Number: 700401832
Inspection Date: 06/04/2020 FIR Submit Date: 06/05/2020 FIR Status:

Inspected Operator Information:

Company Name: FOUNDATION ENERGY MANAGEMENT LLC Company Number: 10112
Address: 5057 KELLER SPRINGS RD STE 650
City: ADDISON State: TX Zip: 75001

LOCATION - Location ID: 316342

Location Name: BANTA RIDGE FED-61S103W Number: 19NENE County: RIO BLANCO
Qtrqtr: NENE Sec: 19 Twp: 1S Range: 103W Meridian: 6
Latitude: 39.951250 Longitude: -108.992310

FACILITY - API Number: 05-103-00 Facility ID: 267520

Facility Name: BANTA RIDGE FED Number: 16-19-1-103
Qtrqtr: NENE Sec: 19 Twp: 1S Range: 103W Meridian: 6
Latitude: 39.951250 Longitude: -108.992310

CORRECTIVE ACTIONS:

1 CA# 139526

Corrective Action: Properly treat or dispose of oily waste in accordance with 907.e. Date: 07/04/2020

Response: CA COMPLETED Date of Completion: 07/06/2020

Corrective action completed, see attached photos.

Operator Comment: _____

COGCC Decision: _____

COGCC Representative: _____

2 CA# 139527

Corrective Action: Securely fasten all valves, pipes, and fittings to ensure good mechanical condition, inspect at regular intervals and maintain in good mechanical condition per Rule 605.d.
Ensure leak is stopped on entire wellhead.

Date: 07/04/2020

Response: CA COMPLETED

Date of Completion: 07/06/2020

Operator Comment: Corrective action completed, see attached photos.

COGCC Decision: _____

COGCC Representative: _____

OPERATOR COMMENT AND SUBMITTAL

Comment: Corrective action has been completed.

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

Print Name: Afton Iiams Signed: _____

Title: HSE/Regulatory Technician Date: 6/28/2021 11:37:31 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>
402731384	Locaiton Photos

Total Attach: 1 Files