

State of Colorado
Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203
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Document Number:
402875600

Date Received:
11/19/2021

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: 10758

Name of Operator: OGRIS OPERATING LLC

Address: PO BOX 53467

City: MIDLAND State: TX Zip: 79710

Contact Name and Telephone:

Name: _____

Phone: () _____ Fax: () _____

Email: _____

Additional Operator Contact:

Contact Name	Phone	Email
ATWATER BONNIE	432-755-0212	batwater@ogrisop.com
Fitzgerald, Edie	719-859-1394	timothy.thomsen@state.co.us
Arthur, Denise		efitzgerald@ogrisop.com
		denise.arthur@state.co.us

COGCC INSPECTION SUMMARY:

FIR Document Number: 690201813

Inspection Date: 07/07/2021

FIR Submit Date: 07/20/2021

FIR Status: _____

Inspected Operator Information:

Company Name: TIMBER CREEK OPERATING LLC

Company Number: 10672

Address: 6295 GREENWOOD PLAZA BLVD #100

City: GREENWOOD State: CO Zip: 8111-4978
VILLAGE

LOCATION - Location ID: 307278

Location Name: APACHE CANYON-634S68W Number: 12SESW County: LAS ANIMAS

Qtrqtr: SESW Sec: 12 Twp: 34S Range: 68W Meridian: 6

Latitude: 37.093930 Longitude: -104.946890

FACILITY - API Number: 05-071- -00 Facility ID: 217352

Facility Name: APACHE CANYON Number: 12-14

Qtrqtr: SESW Sec: 12 Twp: 34S Range: 68W Meridian: 6

Latitude: 37.093930 Longitude: -104.946890

CORRECTIVE ACTIONS:

1 CA# 153921

Corrective Action: Comply with Rule 606

Date: 07/27/2021

Response: CA COMPLETED

Date of Completion: 09/08/2021

Operator Comment: THE BLUE PIPE FRAGMENTS WERE PICKED UP AND PROPERLY DISPOSED OF.

COGCC Decision: _____

COGCC Representative: _____

2 CA# 153922

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

Date: 09/18/2020

Response: CA COMPLETED

Date of Completion: 11/17/2021

Operator Comment: EROSION CONTROL BMP'S WERE INSTALLED, SEE PHOTO LOG FOR DETAILS.

COGCC Decision: _____

COGCC Representative: _____

OPERATOR COMMENT AND SUBMITTAL

Comment: ALL CORRECTIVE ACTIONS HAVE BEEN ADDRESSED.

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

Print Name: Fitzgerald, Edie Signed: _____

Title: Sr. Environmental Tech. Date: 11/19/2021 10:08:37 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>
402875604	PHOTO LOG

Total Attach: 1 Files