FORM
FIRR
Rev 5/16

## State of Colorado Oil and Gas Conservation Commission



Document Number: 402990322

Date Received: 03/21/2022

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

## **FIR RESOLUTION FORM**

Overall Status: <u>CAC</u>	
CA Summary:	
2 of 2 CAs from the FIR responded to on this Form	
2 CA Completed 0 Factual Review Request	
OPERATOR INFOR	MATION
OGCC Operator Number: 10758	Contact Name and Telephone:
Name of Operator: OGRIS OPERATING LLC	Name:
Address: PO BOX 53467	Phone: ( ) Fax: ( )
City: MIDLAND State: TX Zip: 79710	Email:
Additional Operator Contact:	
Contact Name Phone E	Email
<u>ATWATER, BONNIE</u> <u>432-755-0212</u> <u>b</u>	patwater@ogrisop.com
O'SHIELDS, CHARLIE 940-682-5030	coshields@ogrisop.com
GEE, GREG 903-987-0353	ggee@ogrisop.com
<u>WARD, GIENA</u> 719-220-4041	gward@ogrisop.com
COGCC INSPECTION SUMMARY:	
FIR Document Number: 695105723	
Inspection Date: 02/25/2022 FIR Submit Date: 02/25/2022	2 FIR Status:
Inspected Operator Information:	
Company Name: OGRIS OPERATING LLC	Company Number: 10758
Address: PO BOX 53467	
City: MIDLAND State: TX Zip: 797	10
LOCATION - Location ID: 308820	
Location Name: APACHE CANYON-634S68W Number: 23SESE	County: LAS ANIMAS
Qtrqtr: SESE Sec: 23 Twp: 34S Range: 68W	Meridian: 6
Latitude: 37.063992 Longitude: -104.956985	
FACILITY - API Number: 05-07100 Facility ID:	282647
Facility Name: APACHE CANYON Number: 23-16	
Qtrqtr: SESE Sec: 23 Twp: 34S Range: 68W	Meridian: 6
Latitude: 37.063992 Longitude: -104.956985	
`CORRECTIVE ACTIONS:	
1	
Corrective Action: inspect and repair at regular intervals and maintain in go Rule 608.e.	pod mechanical condition per Date: 03/03/2022
Response: CA COMPLETED Date of	of Completion: 03/18/2022

Operator Comment:	THE MUFFLER ON THE COMPRESSOR SKID HAS BEEN REPLACED AND ALL ENGINE OF HAVE BEEN CHECKED TO ENSURE GOOD MECHANICAL CONDITION.	COMPONENTS
COGCC Decision:	: Approved via an AMI	
COGCC Representative:		
2 <b>O</b> CA# 15988	87	
	COMPLY WITH RULE 605. POST SIGN WITH ALL REQUIRED INFORMATION (SINCE THIS SIGN HAS TO BE REPAIRED INCLUDE THE API NUMBER.	Date: 03/25/2022
Response:	CA COMPLETED Date of Completion: 03/17/2022	
Operator Comment:	THE WELL SIGN WAS REPLACED AND POSTED ON THE DOOR OF THE SEPARATOR H	OUSE.
COGCC Decision:	: Approved via an AMI	
COGCC Representative:		
OPERATOR COMME	IENT AND SUBMITTAL	
Comment: ALL C	CORRECTIVE ACTIONS HAVE BEEN ADDRESSED. SEE ATTACHED PHOTO LOG FOR DE	TAILS.
I hereby certify that the statements made in this form are, to the best of my knowledge, true, correct, and complete.		
Print Name: Gien	na Ward Signed:	
Title: Sr. Environm	mental Tech. Date: 3/21/2022 1:23:44 PM	

## **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>
402990322	FIR RESOLUTION SUBMITTED
402990339	PHOTO LOG

Total Attach: 2 Files